

CDC DASH #	VA patient ID	G/A	Facility	Specimen type	TAC RESULTS	LEG MPLEX RESULTS		
(b)(6)	(b)(6)	(b)(6)	GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~32); <i>P. aeruginosa</i> (Ct~27)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~27)			
			GREENSPRING	NP	Rhinovirus (Ct ~35); <i>S. aureus</i> (Ct ~34)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~23); <i>S. aureus</i> (Ct~ 32)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~23); <i>K. pneumoniae</i> (Ct ~35)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~27); <i>S. aureus</i> (Ct~ 34)			
			GREENSPRING	NP	<i>P. aeruginosa</i> (Ct ~32); <i>S. aureus</i> (Ct ~29)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct~32); <i>S. aureus</i> (Ct~30)			
			GREENSPRING	NP	<i>K. pneumoniae</i> (Ct ~32)			
			GREENSPRING	NP	<i>K. pneumoniae</i> (Ct ~31)			
			(b)(6)					
			GREENSPRING	SPUTUM	<i>H. influenzae</i> (all types) (Ct ~19); <i>K. pneumoniae</i> (Ct ~14); <i>S. pneumoniae</i> (Ct~27)	Negative		
			GREENSPRING	SPUTUM	<i>S. aureus</i> (Ct ~35)	Negative		
			GREENSPRING	SPUTUM	<i>S. aureus</i> (Ct~28); <i>K. pneumoniae</i> (Ct ~34)	Negative		
			GREENSPRING	SPUTUM	<i>S. aureus</i> (Ct~20); <i>K. pneumoniae</i> (Ct ~29)	Negative		
			GREENSPRING	SPUTUM	<i>H. influenzae</i> (all types) (Ct ~30); <i>K. pneumoniae</i> (Ct 32)	Negative		
			(b)(6)					
			GREENSPRING	NP	Rhinovirus (Ct~27); <i>H. influenzae</i> (all types) (Ct ~31)			
			GREENSPRING	NP	<i>H. influenzae</i> (all types) (Ct ~23)			
			(b)(6)					
			GREENSPRING	NP	Rhinovirus (Ct~15); PIV3 (Ct~29); <i>H. Influenzae</i> (all types) (Ct~27)			
			(b)(6)					
			GREENSPRING	NP	Rhinovirus (Ct~21); <i>P. aeruginosa</i> (Ct ~22)			
			GREENSPRING	NP	No pathogen detected (controls passed)			
			(b)(6)					



**Centers for Disease Control and Prevention (CDC)**  
**Meningitis and Vaccine Preventable Diseases Branch (MVPDB)**  
**CDC Bacterial Meningitis Laboratory (BML)**

**Laboratory Testing Report**

**Submitter:** Virginia State Public Health Laboratory

**Date received by BML:** 7/17/2019

Submitter ID	CDC Lab ID	Date Collected	Source	Final interpretation	Comments
(b)(6)	(b)(6)	7/13/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	
		7/14/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/14/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/10/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	
		7/10/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/10/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	

***These results are intended for public health purposes only and must NOT be communicated to the patient, their care provider, or placed in the patient's medical record. These results should NOT be used for diagnosis, treatment, or assessment of patient health or management.***

(b)(6)	(b)(6)	7/10/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	
		7/10/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	
		7/14/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	C <sub>t</sub> value close to cut-off for the <i>hpd</i> gene
		7/11/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	C <sub>t</sub> value close to cut-off for the <i>hpd</i> gene
		7/11/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/12/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/12/2019	Sputum	Non-typeable <i>H. influenzae</i>	
		7/13/2019	Sputum	Negative for <i>H. influenzae</i> by rt-PCR	
		7/12/2019	Sputum	Non-typeable <i>H. influenzae</i>	C <sub>t</sub> value close to cut-off for the <i>hpd</i> gene
		7/12/2019	Sputum	Non-typeable <i>H. influenzae</i>	

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(b)(6)	(b)(6)	7/14/2019	Sputum	Non-typeable <i>H. influenzae</i>	
		7/9/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	
		7/12/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	C <sub>t</sub> value close to cut- off for the <i>hpd</i> gene
		7/12/2019	Nasopharyngeal swab	Non-typeable <i>H. influenzae</i>	C <sub>t</sub> value close to cut- off for the <i>hpd</i> gene
		7/12/2019	Nasopharyngeal swab	Negative for <i>H. influenzae</i> by rt-PCR	

**Notes:** The 21 extracted DNA samples were tested by rt-PCR. 13 were positive for non-typeable *Haemophilus influenzae* (NTHi) and 8 were negative by rt-PCR. Five of the 13 positive specimens had C<sub>t</sub> values for the *hpd* gene (species target for *H. influenzae*) that were near the cut-off threshold. All specimens were negative for the serotype-specific genes targets.

**Reported By:** Melissa Whaley, Caelin Potts

**Date:** 7/19/2019

**Reviewed By:** Xin Wang

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**From:** [Lindstrom, Stephen \(CDC/DDID/NCIRD/DVD\)](#)  
**To:** [Whitaker, Brett L. \(CDC/DDID/NCIRD/DVD\)](#); [URDOOutbreaks \(CDC\)](#); [Schneider, Eileen \(CDC/DDID/NCIRD/DVD\)](#); [Tong, Suxiang \(Sue\) \(CDC/DDID/NCIRD/DVD\)](#); [Gerber, Susan I. \(CDC/DDID/NCIRD/DVD\)](#); [Biggs, Holly \(CDC/DDID/NCIRD/DVD\)](#); [Kim, Lindsay \(CDC/DDID/NCIRD/DVD\)](#); [Rha, Brian S. \(CDC/DDID/NCIRD/DVD\)](#); [Watson, John \(CDC/DDID/NCIRD/DVD\)](#); [Van Beneden, Chris A. \(CDC/DDID/NCIRD/DBD\)](#); [Watson, John \(CDC/DDID/NCIRD/DVD\)](#); [Milucky, Jennifer Lynn \(CDC/DDID/NCIRD/DBD\)](#); [Winchell, Jonas \(CDC/DDID/NCIRD/DBD\)](#); [Dawood, Fatimah S. \(CDC/DDID/NCIRD/ID\)](#); [Reed, Carrie \(CDC/DDID/NCIRD/ID\)](#); [Azziz-Baumgartner, Eduardo \(CDC/DDID/NCIRD/ID\)](#); [Fry, Alicia \(CDC/DDID/NCIRD/ID\)](#); [Campbell, Angela J. P. \(CDC/DDID/NCIRD/ID\)](#); [Garg, Shikha \(CDC/DDID/NCIRD/ID\)](#); [Brammer, Lynnette \(CDC/DDID/NCIRD/ID\)](#); [Barnes, John R. \(CDC/DDID/NCIRD/ID\)](#); [Uyek, Timothy M. \(CDC/DDID/NCIRD/ID\)](#); [Fowlkes, Ashley C. \(CDC/DDID/NCIRD/ID\)](#); [Ludiano, A. Danielle \(CDC/DDID/NCIRD/ID\)](#); [Dawood, Fatimah S. \(CDC/DDID/NCIRD/ID\)](#); [Budd, Alicia \(CDC/DDID/NCIRD/ID\)](#); [Jernigan, Daniel B. \(CDC/DDID/NCIRD/ID\)](#); [Tondella, Maria L. \(CDC/DDID/NCIRD/DBD\)](#); [McNamara, Lucy Alexandra \(CDC/DDID/NCIRD/DBD\)](#); [Acosta, Anna \(CDC/DDID/NCIRD/DBD\)](#); [Shieh, Wu-Ju \(CDC/DDID/NCEZID/DHCPP\)](#); [Zaki, Sherif \(CDC/DDID/NCEZID/DHCPP\)](#); [Reagan-Steiner, Sarah \(CDC/DDID/NCEZID/DHCPP\)](#); [Bower, William \(CDC/DDID/NCEZID/DHCPP\)](#); [Mead, Paul \(CDC/DDID/NCEZID/DVBD\)](#); [Wortham, Jonathan \(CDC/DDID/NCHHSTP/DTE\)](#); [Regan, Joanna \(CDC/DDID/NCEZID/DGMO\)](#); [Kersh, Gilbert \(Gil\) \(CDC/DDID/NCEZID/DVBD\)](#); [Vallabhaneni, Snigdha \(CDC/DDID/NCEZID/DHOP\)](#); [Jackson, Brendan R. \(CDC/DDID/NCEZID/DFWED\)](#); [Beer, Karlyn D. \(CDC/DDID/NCEZID/DFWED\)](#); [Cope, Jennifer R. \(CDC/DDID/NCEZID/DFWED\)](#); [Stone, Nimalie \(CDC/DDID/NCEZID/DHOP\)](#); [Kuhar, David T. \(CDC/DDID/NCEZID/DHOP\)](#); [Papagiorgas, Stephen \(CDC/DDID/NCEZID/DPEI\)](#); [Pillai, Satish K. \(CDC/DDID/NCEZID/DPEI\)](#); [Santibanez, Scott \(CDC/DDID/NCEZID/DPEI\)](#); [Villanueva, Julie M. \(CDC/DDID/NCEZID/DPEI\)](#); [Bartley, Suzanne \(CDC/DDID/NCEZID/DSR\)](#); [Schier, Joshua \(CDC/DDID/NCIPC/DUIP\)](#); [Sircar, Kanta \(CDC/DDID/NCIPH/DEHSP\)](#); [Coggeshall, Kira \(CDC/DDPHSIS/CGH/DGHP\)](#); [Raggett, Kip \(CDC/DDPHSIS/CGH/DGHP\)](#); [Bailey, Rachel L. \(CDC/NIOSH/RHD/F88\)](#); [Haloutbreak \(CDC\)](#); [Oliver, Sara Elizabeth \(CDC/DDID/NCIRD/DBD\)](#)  
**Subject:** RE: UPDATE: URDO in Fairfax county, VA  
**Date:** Friday, July 26, 2019 1:24:37 PM

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Hello All,

This is an update of the respiratory virus testing (13 respiratory viruses) on the 32 specimens received from Virginia.

8 specimens confirmed positive for Rhinovirus

1 specimen confirmed positive for Rhinovirus and Parainfluenza virus 3.

Rhinovirus typing results:

Greenspring outbreak 4/27 specimens positive for Rhino:

1x RV-B84

1x RV-A1 (and PIV3)

1x RV-A21

1x RV-A1

Heatherwood outbreak 5/6 specimens positive for Rhino:

4x RV-A21

1x RV-A47

A diagnostic report has been sent to the state.

Please let us know if there are any questions.

Thank you very much.

Steve

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Stephen Lindstrom, Ph.D.  
Team Lead, Respiratory Viruses Diagnostic Laboratory  
Respiratory Viruses Branch  
Division of Viral Diseases, NCIRD  
Centers for Disease Control and Prevention  
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**From:** Whitaker, Brett L. (CDC/DDID/NCIRD/DVD) <[bjr4@cdc.gov](mailto:bjr4@cdc.gov)>

**Sent:** Tuesday, July 23, 2019 5:01 PM

**To:** URDOOutbreaks (CDC) <[URDOOutbreaks@cdc.gov](mailto:URDOOutbreaks@cdc.gov)>; Schneider, Eileen (CDC/DDID/NCIRD/DVD) <[ees2@cdc.gov](mailto:ees2@cdc.gov)>; Tong, Suxiang (Sue) (CDC/DDID/NCIRD/DVD) <[sot1@cdc.gov](mailto:sot1@cdc.gov)>; Gerber, Susan I. (CDC/DDID/NCIRD/DVD) <[bxh1@cdc.gov](mailto:bhx1@cdc.gov)>; Biggs, Holly (CDC/DDID/NCIRD/DVD) <[xdc6@cdc.gov](mailto:xdc6@cdc.gov)>; Kim, Lindsay (CDC/DDID/NCIRD/DVD) <[iyn2@cdc.gov](mailto:iyn2@cdc.gov)>; Rha, Brian S. (CDC/DDID/NCIRD/DVD) <[wif8@cdc.gov](mailto:wif8@cdc.gov)>; Watson, John (CDC/DDID/NCIRD/DVD) <[acq4@cdc.gov](mailto:acq4@cdc.gov)>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <[sql5@cdc.gov](mailto:sql5@cdc.gov)>; Van Beneden, Chris A. (CDC/DDID/NCIRD/DBD) <[cav7@cdc.gov](mailto:cav7@cdc.gov)>; Watson, John (CDC/DDID/NCIRD/DVD) <[acq4@cdc.gov](mailto:acq4@cdc.gov)>; Milucky, Jennifer Lynn (CDC/DDID/NCIRD/DBD) <[wii7@cdc.gov](mailto:wii7@cdc.gov)>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>; Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <[hgi0@cdc.gov](mailto:hgi0@cdc.gov)>; Reed, Carrie (CDC/DDID/NCIRD/ID) <[ggj2@cdc.gov](mailto:ggj2@cdc.gov)>; Azziz-Baumgartner, Eduardo (CDC/DDID/NCIRD/ID) <[eha9@cdc.gov](mailto:eha9@cdc.gov)>; Fry, Alicia (CDC/DDID/NCIRD/ID) <[agf1@cdc.gov](mailto:agf1@cdc.gov)>; Campbell, Angela J. P. (CDC/DDID/NCIRD/ID) <[app4@cdc.gov](mailto:app4@cdc.gov)>; Garg, Shikha

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**Subject:** RE: UPDATE: URDO in Fairfax county, VA

Hi all,

We received and tested 32 specimens for 13 respiratory viruses. In summary we found 7 rhino positives, 2 indeterminate rhinos, and 1 PIV3. The diagnostic report as well as rhino typing results will follow shortly.

Best regards,

Brett

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**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <ydk3@cdc.gov> **On Behalf Of** URDOutbreaks (CDC)

**Sent:** Friday, July 19, 2019 9:45 PM

**To:** URDOutbreaks (CDC) <URDOutbreaks@cdc.gov>; Schneider, Eileen (CDC/DDID/NCIRD/DVD) <ees2@cdc.gov>; Tong, Suxiang (Sue) (CDC/DDID/NCIRD/DVD) <sot1@cdc.gov>; Gerber, Susan I. (CDC/DDID/NCIRD/DVD) <bhx1@cdc.gov>; Biggs, Holly (CDC/DDID/NCIRD/DVD) <xdc6@cdc.gov>; Kim, Lindsay (CDC/DDID/NCIRD/DVD) <iyn2@cdc.gov>; Rha, Brian S. (CDC/DDID/NCIRD/DVD) <wif8@cdc.gov>; Watson, John (CDC/DDID/NCIRD/DVD) <acq4@cdc.gov>; Whitaker, Brett L. (CDC/DDID/NCIRD/DVD) <jjr4@cdc.gov>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <sql5@cdc.gov>; Van Beneden, Chris A. (CDC/DDID/NCIRD/DBD) <cav7@cdc.gov>; Watson, John (CDC/DDID/NCIRD/DVD) <acq4@cdc.gov>; Milucky, Jennifer Lynn (CDC/DDID/NCIRD/DBD) <wii7@cdc.gov>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <zdx2@cdc.gov>; Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <hgj0@cdc.gov>; Reed, Carrie (CDC/DDID/NCIRD/ID) <ggj2@cdc.gov>; Azziz-Baumgartner, Eduardo (CDC/DDID/NCIRD/ID) <eha9@cdc.gov>; Fry, Alicia (CDC/DDID/NCIRD/ID) <agf1@cdc.gov>; Campbell, Angela J. P. (CDC/DDID/NCIRD/ID) <app4@cdc.gov>; Garg, Shikha (CDC/DDID/NCIRD/ID) <izj7@cdc.gov>; Brammer, Lynnette (CDC/DDID/NCIRD/ID) <lsb1@cdc.gov>; Barnes, John R. (CDC/DDID/NCIRD/ID) <fzq9@cdc.gov>; Uyeki, Timothy M. (CDC/DDID/NCIRD/ID) <tmu0@cdc.gov>; Fowlkes, Ashley C. (CDC/DDID/NCIRD/ID) <ahl4@cdc.gov>; Iuliano, A. Danielle CDC/OID/NCIRD (CDC/DDID/NCIRD/ID) <aoi0@cdc.gov>; Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <hgj0@cdc.gov>; Budd, Alicia (CDC/DDID/NCIRD/ID) <acp4@cdc.gov>; Jernigan, Daniel B. (CDC/DDID/NCIRD/ID) <dbj0@cdc.gov>; Tondella, Maria L. (CDC/DDID/NCIRD/DBD) <mlt5@cdc.gov>; McNamara, Lucy Alexandra (CDC/DDID/NCIRD/DBD) <xdf4@cdc.gov>; Acosta, Anna (CDC/DDID/NCIRD/DBD) <vhy8@cdc.gov>; Shieh, Wun-Ju (CDC/DDID/NCEZID/DHCPP) <wbs9@cdc.gov>; Zaki, Sherif (CDC/DDID/NCEZID/DHCPP) <sxz1@cdc.gov>; Reagan-Steiner, Sarah (CDC/DDID/NCEZID/DHCPP) <sor1@cdc.gov>; Bower, William (CDC/DDID/NCEZID/DHCPP)



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**Subject:** UPDATE: URDO in Fairfax county, VA

Dear URDO WG members,

Thank you very much to those of you who have provided their input on this URDO.

Here is a summary of updates:

#### 1. Updates from Fairfax county

- No new cases among assisted living/skilled nursing facility residents since Monday, July 15<sup>th</sup>
- 63 cases among 263 residents (23 confirmed cases who were hospitalized with pneumonia; 40 probable cases; 3 deaths). 19 cases among staff.
- Among the ~1700 independent residents, 18 respiratory illness were reported in July, but unclear if this is increased from baseline.
- No new laboratory test results from the hospital.
- No construction in the premise preceding the outbreak

#### 2. CDC Laboratory testing results

- As of July 19th, 20 NPs, 5 sputa tested by TAC\*
  - *H. influenzae* 11 (2 sputa, 9 NP) -- further typed at the bacterial meningitis lab, all tested were non-typeable
  - Rhinovirus 4 (4 NP)
  - *S. aureus* 8 (3 sputa, 5 NP)
  - *K. pneumoniae* 7 (3NP, 4 sputa)
  - PIV3 1 (1 NP)

### 3. Interpretation of TAC\* results

(b)(5)

### 3. Next steps

- Follow up with Fairfax county on Monday, July 22nd. Review status of the case counts.
- Provide additional laboratory test results when available.

\* Please note: **the TaqMan Array Card is not FDA cleared for diagnostic use; it is intended for research use only.**

Assays included on TaqMan Array Card respiratory panel (CHAMPS Respiratory v2): *Pseudomonas aeruginosa*, *Streptococcus pneumoniae*, *Chlamydia trachomatis*, *Burkholderia pseudomallei*, Varicella zoster virus, Measles virus, Parainfluenza virus 1, Parainfluenza virus 2, Parainfluenza virus 3, Parainfluenza virus 4, MERS coronavirus, Human coronavirus 229E, Human coronavirus NL63, Human coronavirus OC43, Human coronavirus 229E HKU1, Influenza A, Influenza B, Cytomegalovirus, Respiratory syncytial virus, Enterovirus, Adenovirus, *Klebsiella pneumoniae*, *Haemophilus influenzae*, *Haemophilus influenzae* type B, Group A *Streptococcus*, Group B *Streptococcus*, *Staphylococcus aureus*, *Chlamydia pneumoniae*, *Mycoplasma pneumoniae*, *Acinetobacter baumannii*, *Moraxella catarrhalis*, *Corynebacterium diphtheriae*, *Corynebacterium ulcerans*, Diphtheria toxin, *Bordetella* spp., *Bordetella*



*pertussis, Bordetella parapertussis, Rhinovirus, Rubella virus, Human metapneumovirus, Mycobacterium tuberculosis, Pneumocystis jirovecii (PCP).*

---

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)> **On Behalf Of** URDOutbreaks (CDC)  
**Sent:** Wednesday, July 17, 2019 10:45 AM  
**To:** Schneider, Eileen (CDC/DDID/NCIRD/DVD) <[ees2@cdc.gov](mailto:ees2@cdc.gov)>; Tong, Suxiang (Sue) (CDC/DDID/NCIRD/DVD) <[sot1@cdc.gov](mailto:sot1@cdc.gov)>; Gerber, Susan L. (CDC/DDID/NCIRD/DVD) <[bxh1@cdc.gov](mailto:bhx1@cdc.gov)>; Biggs, Holly (CDC/DDID/NCIRD/DVD) <[xdc6@cdc.gov](mailto:xdc6@cdc.gov)>; Kim, Lindsay (CDC/DDID/NCIRD/DVD) <[jyn2@cdc.gov](mailto:jyn2@cdc.gov)>; Rha, Brian S. (CDC/DDID/NCIRD/DVD) <[wif8@cdc.gov](mailto:wif8@cdc.gov)>; Watson, John (CDC/DDID/NCIRD/DVD) <[acq4@cdc.gov](mailto:acq4@cdc.gov)>; Whitaker, Brett L. (CDC/DDID/NCIRD/DVD) <[ijr4@cdc.gov](mailto:ijr4@cdc.gov)>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <[sql5@cdc.gov](mailto:sql5@cdc.gov)>; Van Beneden, Chris A. (CDC/DDID/NCIRD/DBD) <[cav7@cdc.gov](mailto:cav7@cdc.gov)>; Watson, John (CDC/DDID/NCIRD/DVD) <[acq4@cdc.gov](mailto:acq4@cdc.gov)>; Milucky, Jennifer Lynn (CDC/DDID/NCIRD/DBD) <[wii7@cdc.gov](mailto:wii7@cdc.gov)>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>; Langley, Gayle E. (CDC/DDID/NCIRD/DVD) <[fez7@cdc.gov](mailto:fez7@cdc.gov)>; Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Arvay, Melissa (CDC/DDID/NCIRD/DBD) <[cza4@cdc.gov](mailto:cza4@cdc.gov)>; Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <[hgi0@cdc.gov](mailto:hgi0@cdc.gov)>; Reed, Carrie (CDC/DDID/NCIRD/ID) <[ggj2@cdc.gov](mailto:ggj2@cdc.gov)>; Azziz-Baumgartner, Eduardo (CDC/DDID/NCIRD/ID) <[cha9@cdc.gov](mailto:cha9@cdc.gov)>; Fry, Alicia (CDC/DDID/NCIRD/ID) <[agf1@cdc.gov](mailto:agf1@cdc.gov)>; Campbell, Angela J. P. (CDC/DDID/NCIRD/ID) <[app4@cdc.gov](mailto:app4@cdc.gov)>; Garg, Shikha (CDC/DDID/NCIRD/ID) <[izj7@cdc.gov](mailto:izj7@cdc.gov)>; Brammer, Lynnette (CDC/DDID/NCIRD/ID) <[lsb1@cdc.gov](mailto:lsb1@cdc.gov)>; Barnes, John R. (CDC/DDID/NCIRD/ID) <[fzq9@cdc.gov](mailto:fzq9@cdc.gov)>; Uyeke, Timothy M. (CDC/DDID/NCIRD/ID) <[tmu0@cdc.gov](mailto:tmu0@cdc.gov)>; Fowlkes, Ashley C. (CDC/DDID/NCIRD/ID) <[ahl4@cdc.gov](mailto:ahl4@cdc.gov)>; Iuliano, A. Danielle (CDC/DDID/NCIRD/ID) <[aoi0@cdc.gov](mailto:aoi0@cdc.gov)>; Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <[hgi0@cdc.gov](mailto:hgi0@cdc.gov)>; Budd, Alicia (CDC/DDID/NCIRD/ID) <[acp4@cdc.gov](mailto:acp4@cdc.gov)>; Jernigan, Daniel B. (CDC/DDID/NCIRD/ID) <[dbj0@cdc.gov](mailto:dbj0@cdc.gov)>; Tondella, Maria L. (CDC/DDID/NCIRD/DBD) <[mlt5@cdc.gov](mailto:mlt5@cdc.gov)>; McNamara, Lucy Alexandra (CDC/DDID/NCIRD/DBD) <[xdl4@cdc.gov](mailto:xdl4@cdc.gov)>; Acosta, Anna (CDC/DDID/NCIRD/DBD) <[yhy8@cdc.gov](mailto:yhy8@cdc.gov)>; Shieh, Wun-Ju (CDC/DDID/NCEZID/DHCPP) <[whs9@cdc.gov](mailto:whs9@cdc.gov)>; Zaki, Sherif (CDC/DDID/NCEZID/DHCPP) <[sxz1@cdc.gov](mailto:sxz1@cdc.gov)>; Reagan-Steiner, Sarah (CDC/DDID/NCEZID/DHCPP) <[sor1@cdc.gov](mailto:sor1@cdc.gov)>; Bower, William (CDC/DDID/NCEZID/DHCPP) <[wab4@cdc.gov](mailto:wab4@cdc.gov)>; Mead, Paul (CDC/DDID/NCEZID/DVBD) <[pfm0@cdc.gov](mailto:pfm0@cdc.gov)>; Wortham, Jonathan (CDC/DDID/NCHHSTP/DTE) <[vij5@cdc.gov](mailto:vij5@cdc.gov)>; Regan, Joanna (CDC/DDID/NCEZID/DGMQ) <[dlo8@cdc.gov](mailto:dlo8@cdc.gov)>; Kersh, Gilbert (Gil) (CDC/DDID/NCEZID/DVBD) <[hws7@cdc.gov](mailto:hws7@cdc.gov)>; Vallabhaneni, Snigdha (CDC/DDID/NCEZID/DHQP) <[fco6@cdc.gov](mailto:fco6@cdc.gov)>; Jackson, Brendan R. (CDC/DDID/NCEZID/DFWED) <[jyn0@cdc.gov](mailto:jyn0@cdc.gov)>; Beer, Karlyn D. (CDC/DDID/NCEZID/DFWED) <[ydh7@cdc.gov](mailto:ydh7@cdc.gov)>; Cope, Jennifer R. (CDC/DDID/NCEZID/DFWED) <[bjr9@cdc.gov](mailto:bjr9@cdc.gov)>; Stone, Nimalie (CDC/DDID/NCEZID/DHQP) <[ey2@cdc.gov](mailto:ey2@cdc.gov)>; Kuhar, David T. (CDC/DDID/NCEZID/DHQP) <[jto7@cdc.gov](mailto:jto7@cdc.gov)>; Papagiotas, Stephen (CDC/DDID/NCEZID/DPEI) <[faq1@cdc.gov](mailto:faq1@cdc.gov)>; Pillai, Satish K. (CDC/DDID/NCEZID/DPEI) <[yig8@cdc.gov](mailto:yig8@cdc.gov)>; Santibanez, Scott (CDC/DDID/NCEZID/DPEI) <[zqg5@cdc.gov](mailto:zqg5@cdc.gov)>; Villanueva, Julie M. (CDC/DDID/NCEZID/DPEI) <[jfv3@cdc.gov](mailto:jfv3@cdc.gov)>; Bartley, Suzette (CDC/DDID/NCEZID/DSR) <[slb1@cdc.gov](mailto:slb1@cdc.gov)>; Beavers, Suzanne (CDC/DDPHSS/CELS/DSEPD) <[fgx5@cdc.gov](mailto:fgx5@cdc.gov)>; Schier, Joshua (CDC/DDNID/NCIPC/DUIP) <[are8@cdc.gov](mailto:are8@cdc.gov)>; Coggeshall, Kira (CDC/DDPHSS/CGH/DGHP) <[dot9@cdc.gov](mailto:dot9@cdc.gov)>; Baggett, Kip (CDC/DDPHSS/CGH/DGHP) <[hfb8@cdc.gov](mailto:hfb8@cdc.gov)>; Bailey, Rachel L. (CDC/NIOSH/RHD/FSB) <[feu2@cdc.gov](mailto:feu2@cdc.gov)>  
**Cc:** URDOutbreaks (CDC) <[URDOutbreaks@cdc.gov](mailto:URDOutbreaks@cdc.gov)>  
**Subject:** URDO in Fairfax county, VA

Dear URDO WG members,

We were informed of a respiratory outbreak in a retirement community in Fairfax county, VA.  
The following is a summary of information that has been provided to us to date.

Questions for WG members include:

Thoughts on differential diagnosis

Suggestions on testing strategies

Thank you for your time and consideration.

.....

Since June 30, 2019, a retirement community in Fairfax county, VA, has identified cases of respiratory illness (fever, cough, shortness of breath, pneumonia) primarily among residents at the assisted living/skilled nursing facility. The retirement community provides continuing care (ranging from independent patients to assisted living, skilled nursing facility), and the primary site of investigation is at the assisted living/skilled nursing facility with 263 residents in total.

As of yesterday afternoon,

- 63 cases out of the 263 residents in assisted living/skilled nursing facility units
  - Epidemic curves attached
- Confirmed: 23 (X-ray confirmed pneumonia), all required hospitalization at one point
- Probable: 40 (respiratory symptoms such as cough, shortness of breath without evidence of pneumonia)
- Duration of illness: average around 5 days
- 23 hospitalized, no ICU admission, 3 deaths
- They also identified 19 cases among staff, and 14 cases among active, independent residents (in different locations of the retirement community), that are not counted as part of the 63 described above

Interventions to date

- Site visits by Fairfax county department of health staff
- The facility closed for new admissions, no group activities. Residents have been instructed to stay in their rooms.
- Initially, droplet precautions only → now droplet + contact precautions (since July 9<sup>th</sup>)
- Messaging happening to family members of the residents
- Shuttle service between the area where independent residents reside and the assisted living/skilled nursing facility building were cancelled
- Active symptom screening implemented among staff members at the start of their shifts

Laboratory workup

Hospital laboratory work-up

- 8/23 respiratory panel negative (Biofire respiratory panel <https://www.biofire.com/products/the-filmarray-panels/filmarrayrp/>)
- 9/23 *Legionella* UAT, all negative

- 17 had hMPV test, all negative
- Additional RSV, rapid flu tests, all negative

#### State laboratory

- 15/15 NPs Influenza negative by CDC assay

#### CDC pneumonia response and surveillance laboratory (see table below)

- There are 5 specimens with color-coded connections. These are from the same patient (e.g. both yellows are from the same person)
- All 5 sputa specimens tested with the Leg Mplex were negative. RNaseP and controls worked as expected.
- 5 patients has no detections in the Np.
- All specimen and assay controls performed as expected. Please note, the TaqMan Array Card is not FDA cleared for diagnostic use; it is intended for research use only.

G/A	Specimen type	TAC RESULTS	LEG MPLEX RESULTS
(b)(6)	NP	<i>H. influenzae</i> (all types) (Ct ~32); <i>P. aeruginosa</i> (Ct~27)	
	NP	No pathogen detected (controls passed)	
	NP	No pathogen detected (controls passed)	
	NP	<i>H. influenzae</i> (all types) (Ct ~27)	
	NP	Rhinovirus (Ct ~35); <i>S. aureus</i> (Ct ~34)	
	NP	<i>H. influenzae</i> (all types) (Ct ~23); <i>S. aureus</i> (Ct~ 32)	
	NP	<i>H. influenzae</i> (all types) (Ct ~23); <i>K. pneumoniae</i> (Ct ~35)	
	NP	<i>H. influenzae</i> (all types) (Ct ~27); <i>S. aureus</i> (Ct~ 34)	
	NP	<i>P. aeruginosa</i> (Ct ~32); <i>S. aureus</i> (Ct ~29)	
	NP	No pathogen detected (controls passed)	
	NP	No pathogen detected (controls passed)	
	NP	No pathogen detected (controls passed)	
	SPUTUM	<i>H. influenzae</i> (all types) (Ct ~19); <i>K. pneumoniae</i> (Ct ~14); <i>S. pneumoniae</i> (Ct~27)	Negative
	SPUTUM	<i>S. aureus</i> (Ct ~35)	Negative
	SPUTUM	<i>S. aureus</i> (Ct~28); <i>K. pneumoniae</i> (Ct ~34)	Negative
	SPUTUM	<i>S. aureus</i> (Ct~20); <i>K. pneumoniae</i> (Ct ~29)	Negative
	SPUTUM	<i>H. influenzae</i> (all types) (Ct ~30); <i>K. pneumoniae</i> (Ct 32)	Negative

Assays included on TaqMan Array Card respiratory panel (CHAMPS Respiratory v2): *Pseudomonas aeruginosa*, *Streptococcus pneumoniae*, *Chlamydia trachomatis*, *Burkholderia pseudomallei*, Varicella zoster virus, Measles virus, Parainfluenza virus 1, Parainfluenza virus 2, Parainfluenza virus 3, Parainfluenza virus 4, MERS coronavirus, Human coronavirus 229E, Human coronavirus NL63, Human coronavirus OC43, Human coronavirus 229E HKU1, Influenza A, Influenza B, Cytomegalovirus, Respiratory syncytial virus, Enterovirus, Adenovirus, *Klebsiella pneumoniae*, *Haemophilus influenzae*, *Haemophilus influenzae* type B, Group A *Streptococcus*, Group B *Streptococcus*.



*Staphylococcus aureus*, *Chlamydia pneumoniae*, *Mycoplasma pneumoniae*, *Acinetobacter baumannii*, *Moraxella catarrhalis*, *Corynebacterium diphtheriae*, *Corynebacterium ulcerans*, Diphtheria toxin, *Bordetella* spp , *Bordetella pertussis*, *Bordetella parapertussis*, Rhinovirus, Rubella virus, Human metapneumovirus, *Mycobacterium tuberculosis*, *Pneumocystis jirovecii* (PCP).

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**From:** [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#)  
**To:** [Lee, Sooji \(CDC/DDID/NCIRD/DBD\) \(CTR\)](#)  
**Subject:** FW: Fairfax Health District Respiratory Outbreak Call with CDC  
**Date:** Tuesday, July 16, 2019 2:02:07 PM

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FYI These are test results performed at the state lab.

We received specimens at CDC today, but we don't have any info on those yet.

(HRV= target for human rhinovirus/enterovirus)

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)  
**Sent:** Tuesday, July 16, 2019 1:42 PM  
**To:** Garg, Shikha (CDC/DDID/NCIRD/ID) <[izj7@cdc.gov](mailto:izj7@cdc.gov)>; Schneider, Eileen (CDC/DDID/NCIRD/DVD) <[ees2@cdc.gov](mailto:ees2@cdc.gov)>; Biggs, Holly (CDC/DDID/NCIRD/DVD) <[xdc6@cdc.gov](mailto:xdc6@cdc.gov)>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <[sql5@cdc.gov](mailto:sql5@cdc.gov)>  
**Cc:** Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>  
**Subject:** FW: Fairfax Health District Respiratory Outbreak Call with CDC

FYI. Updates on laboratory testing results from DCLS.

Additional 15 specimens that DCLS received were tested for flu (CDC assay)—all negative

One NP from the adjacent facility was tested on their Genmark RVP—HRV positive

**From:** Kelly, Sean <[sean.kelly@dgs.virginia.gov](mailto:sean.kelly@dgs.virginia.gov)>  
**Sent:** Tuesday, July 16, 2019 1:36 PM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Cc:** Schwartz, Benjamin <[Benjamin.Schwartz@fairfaxcounty.gov](mailto:Benjamin.Schwartz@fairfaxcounty.gov)>; Downes, Barbara <[Barbara.Downes@fairfaxcounty.gov](mailto:Barbara.Downes@fairfaxcounty.gov)>; Saady Dawn rkf66307 <[dawn.saady@vdh.virginia.gov](mailto:dawn.saady@vdh.virginia.gov)>; Sockwell, Denise (CDC vdh.virginia.gov) <[Denise.Sockwell@vdh.virginia.gov](mailto:Denise.Sockwell@vdh.virginia.gov)>; Griffin-Thomas Latoya poq24675 <[latoya.griffin-thomas@dgs.virginia.gov](mailto:latoya.griffin-thomas@dgs.virginia.gov)>; Turner Lauren ufp18785 <[lauren.turner@dgs.virginia.gov](mailto:lauren.turner@dgs.virginia.gov)>; Masri Heather cpa76472 <[heather.masri@dgs.virginia.gov](mailto:heather.masri@dgs.virginia.gov)>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>; Price Megan zsw85434 <[megan.price@dgs.virginia.gov](mailto:megan.price@dgs.virginia.gov)>  
**Subject:** Re: Fairfax Health District Respiratory Outbreak Call with CDC

Correct. Sorry about that. We did test the HW NP specimen by the Genmark RVP and it was HRV positive.

Sean

On Tue, Jul 16, 2019 at 1:32 PM Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)> wrote:

I appreciate the update, Sean.

Did you also test the one NP specimen from Heatherwood on your RVP?

**From:** Kelly, Sean <[sean.kelly@dgs.virginia.gov](mailto:sean.kelly@dgs.virginia.gov)>  
**Sent:** Tuesday, July 16, 2019 1:29 PM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Cc:** Schwartz, Benjamin <[Benjamin.Schwartz@fairfaxcounty.gov](mailto:Benjamin.Schwartz@fairfaxcounty.gov)>; Downes, Barbara

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Sockwell, Denise (CDC [vdh.virginia.gov](mailto:vdh.virginia.gov)) <[Denise.Sockwell@vdh.virginia.gov](mailto:Denise.Sockwell@vdh.virginia.gov)>; Griffin-Thomas  
Latoya poq24675 <[latoya.griffin-thomas@dgs.virginia.gov](mailto:latoya.griffin-thomas@dgs.virginia.gov)>; Turner Lauren ufp18785  
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Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>; Price Megan zsw85434  
<[megan.price@dgs.virginia.gov](mailto:megan.price@dgs.virginia.gov)>

**Subject:** Re: Fairfax Health District Respiratory Outbreak Call with CDC

So far we have tested 15 specimens by the CDC real time Influenza assay and all have been determined to be "Influenza not detected by RT-PCR".

5 additional specimens were received today from the outbreak and we will make a determination on testing/shipping to CDC based on information from the call today. Let me know if you have questions.

Thank you,  
Sean



**From:** Winchell, Jonas (CDC/DDID/NCIRD/DBD)  
**Sent:** 16 Jul 2019 19:53:07 +0000  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD); Schwartz, Benjamin; Kelly, Sean; Downes, Barbara; Saady Dawn rkf66307; Sockwell, Denise (CDC vdh.virginia.gov); Griffin-Thomas Latoya poq24675; Turner Lauren ufp18785; Masri Heather cpa76472; Holsinger, Caroline (CDC vdh.virginia.gov); Schneider, Eileen (CDC/DDID/NCIRD/DVD); Biggs, Holly (CDC/DDID/NCIRD/DVD); Lindstrom, Stephen (CDC/DDID/NCIRD/DVD); Garg, Shikha (CDC/DDID/NCIRD/ID); Stone, Nimalie (CDC/DDID/NCEZID/DHQP); Haioutbreak (CDC); Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)  
**Cc:** Prestel, Christopher (CDC/DDID/NCEZID/DHQP); Benowitz, Isaac (CDC/DDID/NCEZID/DHQP); Tanwar, Sukarma (CDC/DDID/NCEZID/DHQP); Kuhar, David T. (CDC/DDID/NCEZID/DHQP); jamie.mcleod@dgs.virginia.gov; Schaefer, Melissa K. (CDC/DDID/NCEZID/DHQP); megan.price@dgs.virginia.gov  
**Subject:** RE: Fairfax Health District Respiratory Outbreak Call  
**Attachments:** TaqmanArray.Resp..pdf

All,

Please see attached list of targets included on the Taqman Array Card that was used during this response. Also, as mentioned, all 5 sputa were also tested for *Legionella* spp., *L. pneumophila* (Lp), and Lp serogroup 1, and a human control. These were unequivocally negative. Please let me know if you have any questions.

Best,  
Jonas

-----Original Appointment-----

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <ydk3@cdc.gov>  
**Sent:** Monday, July 15, 2019 4:28 PM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD); Schwartz, Benjamin; Kelly, Sean; Downes, Barbara; Saady Dawn rkf66307; Sockwell, Denise (CDC vdh.virginia.gov); Griffin-Thomas Latoya poq24675; Turner Lauren ufp18785; Masri Heather cpa76472; Winchell, Jonas (CDC/DDID/NCIRD/DBD); Holsinger, Caroline (CDC vdh.virginia.gov); Schneider, Eileen (CDC/DDID/NCIRD/DVD); Biggs, Holly (CDC/DDID/NCIRD/DVD); Lindstrom, Stephen (CDC/DDID/NCIRD/DVD); Garg, Shikha (CDC/DDID/NCIRD/ID); Stone, Nimalie (CDC/DDID/NCEZID/DHQP); Haioutbreak (CDC); Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)  
**Cc:** Prestel, Christopher (CDC/DDID/NCEZID/DHQP); Benowitz, Isaac (CDC/DDID/NCEZID/DHQP); Tanwar, Sukarma (CDC/DDID/NCEZID/DHQP); Kuhar, David T. (CDC/DDID/NCEZID/DHQP); jamie.mcleod@dgs.virginia.gov; Schaefer, Melissa K. (CDC/DDID/NCEZID/DHQP); megan.price@dgs.virginia.gov  
**Subject:** Fairfax Health District Respiratory Outbreak Call  
**When:** Tuesday, July 16, 2019 3:00 PM-4:00 PM (UTC-05:00) Eastern Time (US & Canada).  
**Where:** Conference call ((b)(6)), access code ((b)(6))

Thank you to all who are able to join the call.

Purpose: to share information regarding the respiratory outbreak investigation at Fairfax to date, to discuss questions that partners may have, and to discuss next steps.

Proposed agenda (I welcome any feedback/suggestions):

1. Roll call
2. Investigation updates (Fairfax CO, VDH)

- Case count (confirmed/probable, any staff cases), # hospitalized, # ICU, # deaths
  - # of new cases since the last call (Friday, July 12<sup>th</sup>)
  - Updates on laboratory testing done at the hospital
  - Laboratory testing done at DCLS
  - Updates on any additional PH interventions (including any updates from Heatherwood)
3. Status of specimens sent to CDC and availability of results (CDC lab)
    - # and types of specimens received
    - Status of testing
  4. Discussion on possible causes, next steps

Thank you,

Miwako

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Office phone: 404-639-2912

# CHAMPS Respiratory

	<i>P. aeruginosa</i>   <i>S. pneumoniae</i> <i>C. trachomatis</i>   <i>B. pseudomallei</i> <i>Varicella zoster virus</i>   Measles virus Parainfluenza virus 1   Parainfluenza virus 3 Parainfluenza virus 2   Parainfluenza virus 4 MERS coronavirus N   MERS-CoV upE Coronavirus NL63   Coronavirus HKU1 Coronavirus 229E   Coronavirus OC43 Influenza A   Influenza B Cytomegalovirus   RSV Internal Pos. Control   Human Control Enterovirus   Adenovirus <i>K. pneumoniae</i>   <i>H. influenzae</i> Group B Streptococcus   <i>H. influenzae</i> type b Group A Streptococcus   <i>S. aureus</i> <i>C. pneumoniae</i>   <i>M. pneumoniae</i> <i>A. baumannii</i>   <i>M. catarrhalis</i> <i>C. diphtheriae</i>   <i>C. ulcerans/pseudotb</i>   DT (toxin) <i>Bordetella</i> spp. (IS481)   <i>Bordetella</i> spp. (pIS1001)   PT (toxin) Rhinovirus Rubella virus Human metapneumovirus <i>M. tuberculosis</i> <i>P. jirovecii</i> (PCP)																								Fill Reservoir
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
A																									NTC
B																									
C																									Sample 1
D																									
E																									Sample 2
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G																									Sample 3
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I																									Sample 4
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M																									Sample 6
N																									
O																									PC
P																									

■ Internal Positive Control (IPCO)  
■ Human Nucleic Acid Control (RNP3)



**From:** [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#)  
**To:** [Cooley, Laura A. \(CDC/DDID/NCIRD/DBD\)](#); [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#); [Lee, Sooji \(CDC/DDID/NCIRD/DBD\) \(CTR\)](#)  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51  
**Date:** Tuesday, July 16, 2019 10:39:23 AM

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Thank YOU all!

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:21 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Excellent! Thanks, Miwako!

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:17 AM  
**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Hi Laura,

The following is what I proposed as the call. Fairfax county has been telling me that they would share a line list/list of specimens, but that has not happened yet.  
We can ask to clarify at the beginning of the call.

Miwako

1. Roll call
2. Investigation updates (Fairfax CO, VDH)
  - Case count (confirmed/probable, any staff cases), # hospitalized, # ICU, # deaths
  - # of new cases since the last call (Friday, July 12<sup>th</sup>)
  - Updates on laboratory testing done at the hospital
  - Laboratory testing done at DCLS
  - Updates on any additional PH interventions (including any updates from Heatherwood)
3. Status of specimens sent to CDC and availability of results (CDC lab)
  - # and types of specimens received
  - Status of testing
4. Discussion on possible causes, next steps

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:07 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** Re: ProMED Digest, Vol 85, Issue 51

Perfect! Ignore the other email you are about to get from me. I'm having some major issues with Outlook--messages sit for 5-10 minutes before leaving my outbox. I am sending this via webmail to avoid confusion (i.e., you'll get this before the other email I just sent). I was curious about others from RDB on the call--I had misinterpreted your previous email to say that you wouldn't be able to join the call. Thanks for clarifying!

I did have another question about lab results. Will they go through the results to date at the start of the call? Would be helpful to know how many UATs have been performed (and if they were performed prior to the initiation of abx).

---

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)  
**Sent:** Tuesday, July 16, 2019 10:02:37 AM  
**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); Smith, Jessica (CDC/DDID/NCIRD/DBD), Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)  
**Cc:** Albert, Alison P. (CDC/DDID/NCIRD/DBD)  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

And to your last point,

The other RDB epi would be me. But we will also have people from DVD, ID, and DHQP, so I thought we have plenty from CDC. We will also have Jonas, and Alison (thank you) might be listening in.

-----Original Message-----

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 9:47 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Cc:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Hi Miwako! Looping in Sooji, who is available to join the call at 3:00. Thanks, Sooji!

Sooji, see below and attached.

Interesting discrepancy with the pneumonia count. This would be important to clarify. As they mention, PF, by definition, is not pneumonia--and it would be extremely unusual for PF to result in hospitalization or death. PF is self-resolving--so if these folks are requiring abx to recover, I would consider other diagnoses.

They are right that PF is a bit of a diagnostic challenge. The old gold standard is serology, but you have to get acute and convalescent sera (and nobody does that anymore). UAT is occasionally positive in PF, but it's not super reliable (for PF, UAT is really only helpful when positive).

Just to clarify, it doesn't look like Legionella is included on the state's respiratory panel. That would be the one diagnostic gap if LD is still being considered (i.e., sounds like UATs to date have been negative, but a non-Lp1 Legionella can always be including in the differential). Just chatted with Jess and she said that Claressa communicated with the VA lab last week--and recommended adding Legionella PCR. Apparently, she offered for them to send it here, but also said that if they could find a lab to do it locally, that might be more efficient. Miwako, do you know if there have been any developments here? Y'all can always loop in Claressa if you have questions.

Miwako, will there be anyone else from RDB on this call?

Thanks so much!  
Laura

-----Original Message-----

From: Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
Sent: Tuesday, July 16, 2019 9:10 AM  
To: Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
Cc: Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
Subject: FW: ProMED Digest, Vol 85, Issue 51

Good morning Jessica, Laura.

As you may be aware, on Friday, we had an URDO call related to the outbreak happening at a retirement community in Fairfax VA.

I just read the promed posting related to this and realized that someone is entertaining the idea that Pontiac fever might be possible.

Note that the information described below is different from what we heard on Friday (i.e., promed article below says that only 2/55 had pneumonia, whereas on Friday, we were told 19/55 had provider-diagnosed pneumonia (most were X-ray confirmed)).

At this point, I have low suspicion based on the information we received. But given this posting, I am wondering if someone from the Legionella team could join the call we have scheduled at 3pm? I'd be happy to forward the invite if you could tell me who might be available to join. Unfortunately I am teleworking today (my husband having a procedure), so I don't have a room scheduled.

I will also forward the call notes from Friday.

Thanks again, and please feel free to call me with Qs (b)(6).

Miwako

-----Original Message-----

From: [promed-bounces@promedmail.org](mailto:promed-bounces@promedmail.org) <[promed-bounces@promedmail.org](mailto:promed-bounces@promedmail.org)> On Behalf Of [promed-request@promedmail.org](mailto:promed-request@promedmail.org)  
Sent: Tuesday, July 16, 2019 8:00 AM  
To: [promed@promedmail.org](mailto:promed@promedmail.org)  
Subject: ProMED Digest, Vol 85, Issue 51



Today's Topics:

2. PRO/EDR> Undiagnosed respiratory illness - USA (02): (VA)  
fatal, retirement community ([promed@promedmail.org](mailto:promed@promedmail.org))

-----  
Message: 2

Date: Tue, 16 Jul 2019 07:15:12 +0000

From: [promed@promedmail.org](mailto:promed@promedmail.org)

Subject: PRO/EDR> Undiagnosed respiratory illness - USA (02): (VA)  
fatal, retirement community

To: [promed-post@promedmail.org](mailto:promed-post@promedmail.org), [promed-cdr-post@promedmail.org](mailto:promed-cdr-post@promedmail.org)

Message-ID:

<0100016bf9a29eb1-b1d9d368-21b0-44f7-93b1-8662d8a8d997-  
000000@email.amazonses.com>

Content-Type: text/plain; charset=UTF-8

## UNDIAGNOSED RESPIRATORY ILLNESS - USA (02): (VIRGINIA) FATAL, RETIREMENT COMMUNITY

\*\*\*\*\*

A ProMED-mail post

<<http://www.promedmail.org>>

ProMED-mail is a program of the

International Society for Infectious Diseases <<http://www.isid.org>>

Date: Sun 14 Jul 2019

Source: Fairfax News [edited]

<<http://fairfaxnews.com/2019/07/health-officials-hoping-to-find-cause-of-greenspring-outbreak/>>

Testing will continue this week to try to learn why 55 residents of the Greenspring assisted-living center in Springfield have become ill, 20 have been hospitalized, and 2 have died in recent weeks. County health officials say the center has been closed to new admissions while efforts to pinpoint the cause of the infections continue.

"The individuals who died were hospitalized with pneumonia. Both were older adults and had complex medical problems. The Health Department does not know the full medical history and the extent to which the pneumonia contributed to the deaths," said spokesman John Silcox in a news release [Fri 12 Jul 2019]. Health Department officials said that tests [have] so far been negative for common viral and bacterial infections, including [influenza] and legionnaires' disease [LD]. Samples have been sent to the Virginia Health Department in Richmond and forwarded to the federal Centers for Disease Control and Prevention in Atlanta for additional testing.

Greenspring is located on a 58-acre [about 23 ha] campus. It features a comprehensive continuing care neighborhood that includes assisted living, memory care, short-term rehabilitation, and long-term care.

Greenspring is operated by Erickson Living, which has facilities housing 24 000 people in 11 states.

County health officials have said Erickson is doing an "excellent job" of managing the outbreak.

[byline: Truman Lewis]

--

communicated by:

ProMED-mail

<[promed@promedmail.org](mailto:promed@promedmail.org)>

[The news article above updates information on an outbreak of an acute respiratory illness that has now affected 55 individuals, 20 of whom were hospitalized, 2 with a pneumonia that was fatal, in the past 2 weeks in the assisted-living and skilled-nursing sections of a retirement community in northern Virginia. Symptoms included fever, cough, body aches, wheezing, hoarseness, and general weakness. The specific cause of the outbreak has not yet been identified, although the article reports "tests [have] so far been negative for common viral and bacterial infections, including [influenza] and legionnaires' disease [LD]." The viral and bacterial infections that were ruled out are not specified.

We have only been told that 2 of the 55 affected individuals had pneumonia. Pontiac fever, the non-pneumonic form of legionella infection, would still be a possible cause for those cases without pneumonia. Sputum culture and the urinary antigen test for LD are usually negative in Pontiac fever. Symptoms of Pontiac fever (fever, malaise, and muscle aches) are less severe than LD, and resolve in 2 to 5 days without antibiotic treatment (<<https://www.cdc.gov/legionella/clinicians/clinical-features.html>>).

Pontiac fever develops within hours to 3 days after exposure vs 2 to 10 days for LD. Attack rates for Pontiac fever are high; up to 95% of exposed persons become ill vs less than 5% for LD. Unlike LD, there appear to be no predisposing host conditions for Pontiac fever (<<https://www.cdc.gov/legionella/clinicians/disease-specifics.html>>).

A more detailed description of the clinical presentation and prior health status of the affected individuals and whether they were staff or residents would be helpful.

\_Chlamydia (Chlamydophila) pneumoniae\_ and \_Mycoplasma pneumoniae\_ infections occur year-round, but are characterized by their slow spread through closed populations, unlike the outbreak described in the news article above.

Greenspring is a retirement community, with independent living, assisted living, memory care, short- and long-term nursing care units, supported by a staff of more than 1200 in Springfield, Fairfax County in northern Virginia (<<https://www.ericksonliving.com/greenspring/about>>). Springfield, along with collective areas with Springfield addresses, having an estimated population of more than 100 000 residents in 2010, is located in the Washington Metropolitan Area (<[https://en.wikipedia.org/wiki/Springfield,\\_Virginia](https://en.wikipedia.org/wiki/Springfield,_Virginia)>). A map showing the location of Springfield can be found at <<https://goo.gl/maps/chDaXq4jVgnfDMSNA>>  
HealthMap/ProMED-mail map of Virginia, United States:  
<<http://healthmap.org/promed/p/49594>>

We await further developments in the investigation of this outbreak. - Mod.ML]

[See Also:

Undiagnosed respiratory illness - USA: (VA) fatal, retirement community

<http://promedmail.org/post/20190713.6565337>

2018

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Undiagnosed respiratory illness - USA (02): (NY) ex Middle East, influenza conf.  
<http://promedmail.org/post/20180906.6011730>  
Undiagnosed respiratory illness - USA: (New York) ex Middle East, flight, RFI  
<http://promedmail.org/post/20180905.6009759>  
.....sb/ml/mj/sh

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End of ProMED Digest, Vol 85, Issue 51

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# CHAMPS Respiratory

	<i>P. aeruginosa</i>   <i>S. pneumoniae</i> <i>C. trachomatis</i>   <i>B. pseudomallei</i> <i>Varicella zoster virus</i>   Measles virus Parainfluenza virus 1   Parainfluenza virus 3 Parainfluenza virus 2   Parainfluenza virus 4 MERS coronavirus N   MERS-CoV upE Coronavirus NL63   Coronavirus HKU1 Coronavirus 229E   Coronavirus OC43 Influenza A   Influenza B Cytomegalovirus   RSV Internal Pos. Control   Human Control Enterovirus   Adenovirus <i>K. pneumoniae</i>   <i>H. influenzae</i> Group B Streptococcus   <i>H. influenzae</i> type b Group A Streptococcus   <i>S. aureus</i> <i>C. pneumoniae</i>   <i>M. pneumoniae</i> <i>A. baumannii</i>   <i>M. catarrhalis</i> <i>C. diphtheriae</i>   <i>C. ulcerans/pseudotb</i>   DT (toxin) <i>Bordetella</i> spp. (IS481)   <i>Bordetella</i> spp. (pIS1001)   PT (toxin) Rhinovirus Rubella virus Human metapneumovirus <i>M. tuberculosis</i> <i>P. jirovecii</i> (PCP)																								Fill Reservoir
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
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G																									Sample 3
H																									
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J																									
K																									Sample 5
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M																									Sample 6
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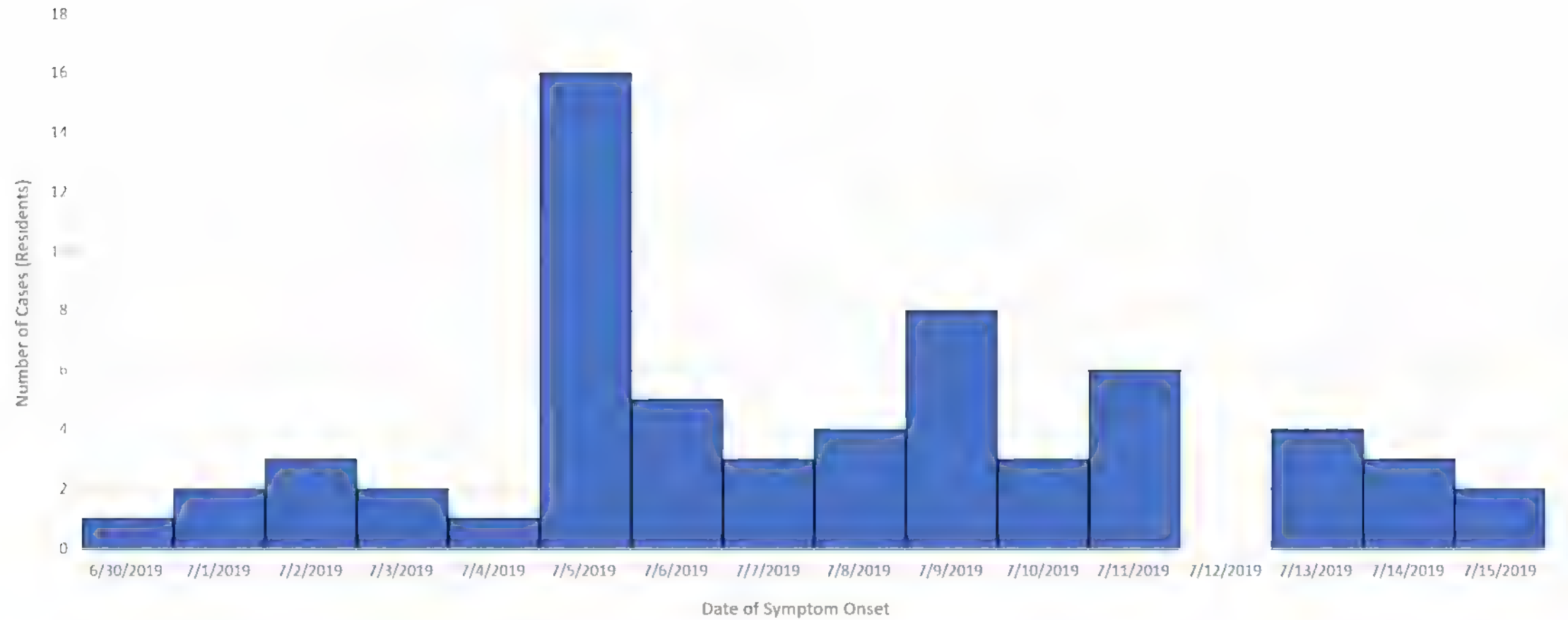
■ Internal Positive Control (IPCO)  
■ Human Nucleic Acid Control (RNP3)



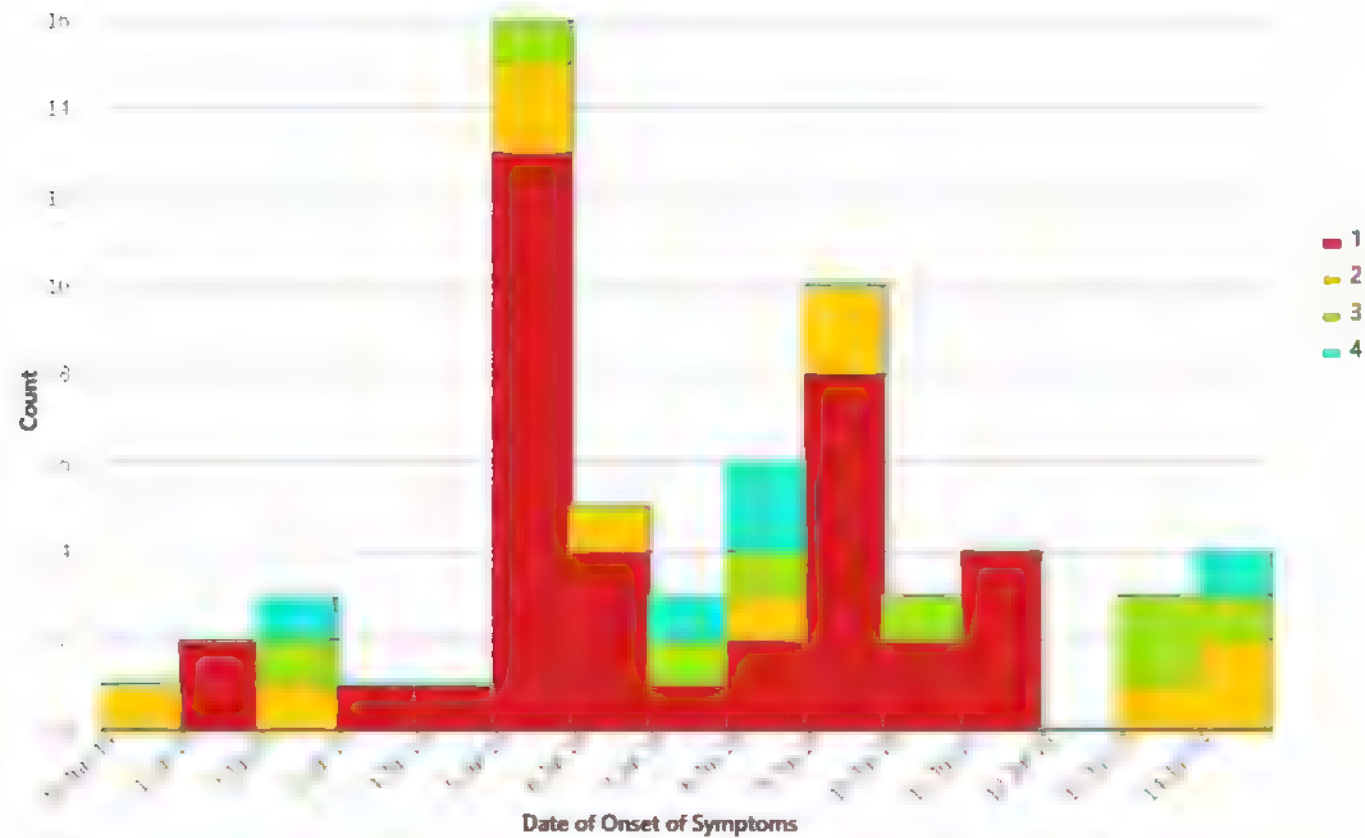
# Respiratory Outbreak Investigation

Fairfax County Health Department

# Epi-Curve 07/16/19



## Epi-Curve by Floor –07/15/19



(b)(6)

1<sup>ST</sup> Floor



(b)(6)

2<sup>ND</sup> Floor

(b)(6)

3<sup>RD</sup> Floor

(b)(6)

4<sup>TH</sup> Floor

**From:** [Legionella Lab \(CDC\)](#)  
**To:** [Lucas, Claressa \(CDC/DDID/NCIRD/DBD\)](#); [Kozak Muznieks, Natalia A. \(CDC/DDID/NCIRD/DBD\)](#); [Brown, Ellen \(CDC/DDID/NCIRD/DBD\)](#); [Mercante, Jeffrey W. \(CDC/DDID/NCIRD/DBD\)](#); [Winchell, Jonas \(CDC/DDID/NCIRD/DBD\)](#); [Ishaq, Maliha \(CDC/DDID/NCIRD/DBD\) \(CTR\)](#); [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#)  
**Subject:** FW: Legionella testing inquiry  
**Date:** Friday, July 12, 2019 1:17:12 PM

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---

**From:** Turner, Lauren  
**Sent:** Friday, July 12, 2019 5:14:50 PM (UTC+00:00) Monrovia, Reykjavik  
**To:** Lucas, Claressa (CDC/DDID/NCIRD/DBD)  
**Cc:** Legionella Lab (CDC); Smith, Jessica (CDC/DDID/NCIRD/DBD)  
**Subject:** Re: Legionella testing inquiry

Thank you, Claressa!

We have been in contact with Alvaro Benitez about submitting specimens and plan to ship them out Monday of next week.

Lauren

On Fri, Jul 12, 2019 at 11:51 AM Lucas, Claressa (CDC/DDID/NCIRD/DBD) <[chl9@cdc.gov](mailto:chl9@cdc.gov)> wrote:

Hi Lauren,

Yes, the LRDO group would be your best resource for those other organizations. I've cc'ed Dr. Maureen Diaz here for your POC on that front. Let us know if you need anything else on the Legionella side.

Best wishes,

Claressa

---

**From:** Turner, Lauren <[lauren.turner@dgs.virginia.gov](mailto:lauren.turner@dgs.virginia.gov)>  
**Sent:** Thursday, July 11, 2019 6:41 PM  
**To:** Lucas, Claressa (CDC/DDID/NCIRD/DBD) <[chl9@cdc.gov](mailto:chl9@cdc.gov)>  
**Cc:** Legionella Lab (CDC) <[legionellalab@cdc.gov](mailto:legionellalab@cdc.gov)>, Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>  
**Subject:** Re: Legionella testing inquiry

Thank you, Claressa.



Would I need to work with the unexplained respiratory disease team to request testing beyond legionellosis, for organisms like Chlamydia pneumoniae or Mycoplasma pneumoniae for example?

On Wed, Jul 10, 2019 at 4:29 PM Lucas, Claressa (CDC/DDID/NCIRD/DBD) <[chl9@cdc.gov](mailto:chl9@cdc.gov)> wrote:

Hi Lauren,

We typically perform PCR and culture concurrently on clinical specimens, so just requesting PCR will not affect the TAT. Our TAT for preliminary results from the PCR is within 5 days. The final report from culture may take up to 30 days, but is generally complete within 14. However, we can certainly work with you if time is of the essence during an investigation.

Best wishes,

Claressa

**From:** Turner, Lauren <[lauren.turner@dgs.virginia.gov](mailto:lauren.turner@dgs.virginia.gov)>

**Sent:** Wednesday, July 10, 2019 3:37 PM

**To:** Lucas, Claressa (CDC/DDID/NCIRD/DBD) <[chl9@cdc.gov](mailto:chl9@cdc.gov)>

**Cc:** Legionella Lab (CDC) <[legionellalab@cdc.gov](mailto:legionellalab@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>

**Subject:** Re: Legionella testing inquiry

Hi Claressa

Is the TAT to results shorter if PCR is the only test requested by the submitting laboratory? Do all specimens proceed from PCR to culture for isolation and identification?

Thank you

On Tue, Jul 9, 2019 at 12:59 PM Lucas, Claressa (CDC/DDID/NCIRD/DBD) <[chl9@cdc.gov](mailto:chl9@cdc.gov)> wrote:

Dear Lauren,

It was a pleasure speaking with you just now. As we discussed on the phone, we would be happy to assist should you decide to pursue an investigation of the pneumonia cases. As promised, I've cc'ed our epidemiologist, Jessica Smith, so that you may discuss the approach for moving forward. Please don't hesitate to contact us should you have further questions about *Legionella* testing.

Best wishes,

Claressa

**Claressa Lucas, PhD**

***ELITE Program Coordinator***

***Centers for Disease Control and Prevention***

***1600 Clifton Rd NE MS H18-1***

***Atlanta, GA 30329***

***Ph: (404) 639-3564***

***FAX: (866) 638-0199***

**From:** Turner, Lauren <[lauren.turner@dgs.virginia.gov](mailto:lauren.turner@dgs.virginia.gov)>

**Sent:** Tuesday, July 9, 2019 12:38 PM

**To:** Legionella Lab (CDC) <[legionellalab@cdc.gov](mailto:legionellalab@cdc.gov)>

**Subject:** Legionella testing inquiry

Good afternoon,

I have received an inquiry from a local health department in Virginia about testing support for a pneumonia outbreak at an assisted living facility for which the etiologic agent is unknown. Our laboratory does not perform diagnostic testing for *Legionella* at this time and I would like to receive information on submission of sputum specimens to

the CDC for detection and identification of Legionella. It is my understanding that several patients have had urine antigen negative results and the health department is interested in pursuing an assay with greater sensitivity.

Are there submission instructions in addition to the CDC Test Directory that I should refer to? Please let me know if pre-approval is required prior to submitting specimens.

Thank you

Lauren

--

Lauren Turner, Ph.D.  
Foodborne and Advanced Pathogen Characterization Lead Scientist  
Department of General Services/Division of Consolidated Laboratory Services  
Office: 804-648-4480 ext. 122 | Cell: (b)(6)  
[600 N. 5th Street, Richmond, VA 23219](mailto:lauren.turner@dgs.virginia.gov)  
<https://dgs.virginia.gov/division-of-consolidated-laboratory-services/>

--

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<https://dgs.virginia.gov/division-of-consolidated-laboratory-services/>

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MIDDLE EAST, NORTH AFRICA, AND INTERNATIONAL  
TERRORISM  
ASIA, THE PACIFIC, AND NONPROLIFERATION

July 18, 2019

Robert R. Redfield, MD  
Director  
Centers for Disease Control and Prevention  
1600 Clifton Road  
Atlanta, GA 30329 USA

Dear Dr. Redfield:

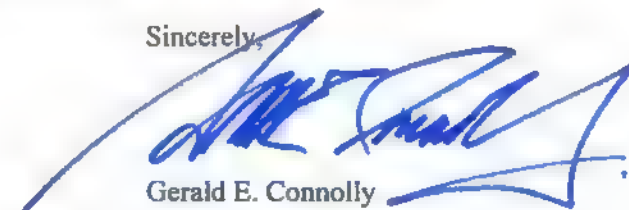
I am writing to urge you to provide the necessary assistance and available resources to the Fairfax County Health Department to determine the source of a respiratory illness outbreak in our community and help prevent its further spread. I want to thank the Centers for Disease Control and Prevention (CDC) for the assistance it has provided thus far, and I hope this urgent matter can be resolved as soon as possible.

For more than two weeks, residents and employees of Greenspring Retirement Community in Springfield, Virginia have been experiencing respiratory symptoms ranging from mild coughing to severe pneumonia. As of Thursday, July 18, three people have died, and 63 residents and 19 employees have had symptoms. A similar but potentially unrelated outbreak has affected the Heatherwood Retirement Community in nearby Burke, Virginia where 25 people have been reported sick. Community members are understandably very concerned.

It is imperative that this situation be addressed immediately. The Fairfax County Health Department would benefit from your continued support to aid their response to this outbreak. CDC involvement ensures this situation is being handled with the appropriate seriousness it requires and signals that patients' health is our top priority. I understand that the CDC has found bacteria present in 17 samples from the sick residents, and I urge you to further investigate the situation and the nature of the illnesses.

Thank you for your attention to this important and urgent matter and for the outstanding work your agency does in the interest of public health. Our community appreciates your continued support. Please do not hesitate to contact my office if we can be of assistance, and I look forward to hearing from you soon.

Sincerely,



Gerald E. Connolly  
Member of Congress  
11<sup>th</sup> District, Virginia

**From:** [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#)  
**To:** [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#); [Cooley, Laura A. \(CDC/DDID/NCIRD/DBD\)](#)  
**Subject:** FW: Fairfax county URDO updates  
**Date:** Tuesday, July 16, 2019 9:14:32 AM

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FYI

The call notes from Friday are listed below the update from Monday.

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)

**Sent:** Monday, July 15, 2019 6:32 PM

**To:** Schneider, Eileen (CDC/DDID/NCIRD/DVD) <ees2@cdc.gov>; Biggs, Holly (CDC/DDID/NCIRD/DVD) <xdc6@cdc.gov>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <sql5@cdc.gov>; Diaz, Maureen (CDC/DDID/NCIRD/DBD) <iqs5@cdc.gov>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <zdx2@cdc.gov>; Garg, Shikha (CDC/DDID/NCIRD/ID) <izj7@cdc.gov>; Barnes, John R. (CDC/DDID/NCIRD/ID) <fzq9@cdc.gov>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <yxj2@cdc.gov>; Albert, Alison P. (CDC/DDID/NCIRD/DBD) <aqp0@cdc.gov>; Benitez, Alvaro J. (CDC/DDID/NCIRD/DBD) <ilh4@cdc.gov>; Stone, Nimalie (CDC/DDID/NCEZID/DHQP) <ey2@cdc.gov>; Haioutbreak (CDC) <haioutbreak@cdc.gov>

**Cc:** Schrag, Stephanie (CDC/DDID/NCIRD/DBD) <zha6@cdc.gov>; Craig, Allen (CDC/DDID/NCIRD/DBD) <afc0@cdc.gov>

**Subject:** Fairfax county URDO updates

Dear all,

Below are updates from the Fairfax county outbreak. They mentioned earlier that they will be sharing additional information later today, but I have not received further information as of now.

1. Epi updates:

- Additional cases identified and hospitalized over the weekend (1 Saturday and 1 Sunday). Total case count 57.
- 1 case that was discharged last week was re-hospitalized on 07/14/19 with worsening symptoms.
- 3 residents have been discharged into hospice care.

2. Lab updates:

- As of this morning, a total of 15 NP and 5 sputum samples were available at DCLS, scheduled for delivery at the CDC (pneumonia response and surveillance) lab tomorrow
  - This includes at least 1 specimen received from the second adjacent facility. DCLS will be performing both RVP (GenMark eSensor XT-8 RVP) and influenza (CDC assay) on this specimen.
  - DCLS will also be performing influenza testing (CDC assay) on additional 10 specimens (2 that were received on Friday, and 8 additional that were received over the weekend)
- We have asked to share test results whenever available

3. Follow up call

- Next call with Fairfax county and VDH is tentatively scheduled tomorrow afternoon, Tuesday July 16<sup>th</sup> at 3pm, in anticipation of specimen receipt at CDC
- Call-in information has been shared
- Kindly limit the number of representatives from each group

I appreciate your participation and assistance.

Miwako

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)

**Sent:** Friday, July 12, 2019 8:24 PM

**To:** Schneider, Eileen (CDC/DDID/NCIRD/DVD) <[ees2@cdc.gov](mailto:ees2@cdc.gov)>, Biggs, Holly (CDC/DDID/NCIRD/DVD) <[xdc6@cdc.gov](mailto:xdc6@cdc.gov)>; Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <[sql5@cdc.gov](mailto:sql5@cdc.gov)>; Diaz, Maureen (CDC/DDID/NCIRD/DBD) <[iqs5@cdc.gov](mailto:iqs5@cdc.gov)>; Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>; Garg, Shikha (CDC/DDID/NCIRD/ID) <[izj7@cdc.gov](mailto:izj7@cdc.gov)>; Barnes, John R. (CDC/DDID/NCIRD/ID) <[fzq9@cdc.gov](mailto:fzq9@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yx2@cdc.gov](mailto:yx2@cdc.gov)>; Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>; Benitez, Alvaro J. (CDC/DDID/NCIRD/DBD) <[ilh4@cdc.gov](mailto:ilh4@cdc.gov)>; Stone, Nimalie (CDC/DDID/NCEZID/DHQP) <[eiv2@cdc.gov](mailto:eiv2@cdc.gov)>; Haioutbreak (CDC) <[haioutbreak@cdc.gov](mailto:haioutbreak@cdc.gov)>

**Cc:** Schrag, Stephanie (CDC/DDID/NCIRD/DBD) <[zha6@cdc.gov](mailto:zha6@cdc.gov)>; Craig, Allen (CDC/DDID/NCIRD/DBD) <[afc0@cdc.gov](mailto:afc0@cdc.gov)>

**Subject:** RE: URDO: Conf Call requested this afternoon at 1:30 PM.

Dear all,

Thank you very much for joining the call today and providing your input.

Please see the notes from the call today, and I please feel free to contact me with any questions/comments/concerns.

Best wishes,

Miwako

- Since June 30<sup>th</sup>, respiratory illnesses among 55 residents have been identified in a retirement community with 263 residents in Fairfax county, VA.
  - o 19 confirmed (case definition: provider-diagnosed pneumonia on or after June 30<sup>th</sup>, many were X-ray confirmed)
  - o 36 probable (case definition: symptoms of cough, shortness of breath, or difficulty

- breathing on or after June 30<sup>th</sup>)
  - 20 hospitalized; 7 remain in the hospital
  - 2 deaths (both with underlying chronic medical problems, one was in hospice)
- Fairfax county was informed on July 8<sup>th</sup>, site visit occurred twice (July 8<sup>th</sup> and 12<sup>th</sup>)
- None of the staff met the case definition (except for one nursing staff who reported cough this AM)
- New cases have been identified up to today; peak was July 5<sup>th</sup> when there were 15 cases identified. Numbers appear to be slowing down.
- Facility
  - Retirement community that provides continuing care (includes assisted living, memory care, skilled nursing care)
  - Most of the cases were from assisted living/skilled nursing care units. One floor (assisted living) with the highest attack rate had 20 out of the 29 residents affected
- Intervention to date
  - The facility closed for new admissions, no group activities. Residents have been instructed to stay in their rooms.
  - Initially, droplet precautions only → now droplet + contact precautions (since July 9<sup>th</sup>)
  - Messaging happening to family members of the residents
- Testing done to date
  - Hospital
    - 8 (all were confirmed cases) had upper respiratory specimens tested on BioFire (see the targets on the panel below) → all negative
    - Some had additional testing, such as UAT for *Legionella* and *S. pneumoniae*, RSV testing, blood culture → all negative to date
  - VA state lab (DCLS)
    - 5 upper respiratory specimens (from non-hospitalized patients) collected and tested for influenza (CDC assay) → negative
    - 2 more upper respiratory specimens and 3 (or 4) sputum specimens from hospitalized patients may be available (no testing done yet, lab was assessing specimen volume available)
- Situation in the community
  - Syndromic surveillance has indicated increase in respiratory illness in the community a few weeks ago
  - There is an assisted facility located 2 miles from the current facility. The county is aware of at least 17 cases of respiratory illness among their residents. Details unknown.

#### **Next steps discussed**

- DCLS to send the 7 upper respiratory specimens (and 3-4 additional sputum specimens) to CDC DBD lab for overnight shipment on Monday
- CDC recommended:
  - Fairfax county to continue specimen collection from new cases. Lower respiratory specimens if possible for patients with signs/symptoms of lower respiratory tract infection

- If tissue available from the deceased, then DVD can process fresh frozen tissue at their lab. We can reach out to IDBP if formalin fixed tissue available.
- Fairfax county to reach out to the adjacent assisted living facility and collect specimens from their patients if possible, and to improve awareness among other facilities in the county to encourage early notification.
- Requested Fairfax county to share line list/epi curve/maps if possible
- POC at CDC (Miwako Kobayashi) and VA state/Fairfax county identified
- Ok to mention that Fairfax county has communicated with CDC and CDC may receive specimens for testing. CDC DBD/NCIRD comms staff informed of the situation.

\*Targets on the respiratory panel performed at the hospital

◦ **Inova's Respiratory pathogen panel, PCR (Film Array)**

- Adenovirus
- Bordetella pertussis
- Chlamydia pneumoniae
- Coronavirus 229E
- Coronavirus HKU1
- Coronavirus NL63
- Coronavirus OC43
- Human Metapneumovirus
- Human Rhinovirus/Enterovirus
- Influenza A
- Influenza A/H1
- Influenza A/H3
- Influenza AH1-2009
- Influenza B
- Parainfluenza Virus 1
- Parainfluenza Virus 2
- Parainfluenza Virus 3
- Parainfluenza Virus 4
- Mycoplasma pneumoniae
- Respiratory Syncytial Virus

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)

**Sent:** Friday, July 12, 2019 10:16 AM

**To:** Schneider, Eileen (CDC/DDID/NCIRD/DVD) <[ees2@cdc.gov](mailto:ees2@cdc.gov)>, Biggs, Holly (CDC/DDID/NCIRD/DVD) <[xdc6@cdc.gov](mailto:xdc6@cdc.gov)>, Whitaker, Brett L. (CDC/DDID/NCIRD/DVD) <[ijr4@cdc.gov](mailto:ijr4@cdc.gov)>, Lindstrom, Stephen (CDC/DDID/NCIRD/DVD) <[sql5@cdc.gov](mailto:sql5@cdc.gov)>, Diaz, Maureen (CDC/DDID/NCIRD/DBD) <[qs5@cdc.gov](mailto:qs5@cdc.gov)>, Milucky, Jennifer Lynn (CDC/DDID/NCIRD/DBD) <[wi.7@cdc.gov](mailto:wi.7@cdc.gov)>, Winchell, Jonas (CDC/DDID/NCIRD/DBD) <[zdx2@cdc.gov](mailto:zdx2@cdc.gov)>, Dawood, Fatimah S. (CDC/DDID/NCIRD/ID) <[hgi0@cdc.gov](mailto:hgi0@cdc.gov)>, Campbell, Angela J. P. (CDC/DDID/NCIRD/ID) <[app4@cdc.gov](mailto:app4@cdc.gov)>, Garg, Shikha (CDC/DDID/NCIRD/ID) <[izj7@cdc.gov](mailto:izj7@cdc.gov)>, Barnes, John R. (CDC/DDID/NCIRD/ID) <[fzq9@cdc.gov](mailto:fzq9@cdc.gov)>;



Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[vyxj2@cdc.gov](mailto:vyxj2@cdc.gov)>; Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>; Benitez, Alvaro J. (CDC/DDID/NCIRD/DBD) <[jlh4@cdc.gov](mailto:jlh4@cdc.gov)>; Stone, Nimalie (CDC/DDID/NCEZID/DHQP) <[eyv2@cdc.gov](mailto:eyv2@cdc.gov)>; Haioutbreak (CDC) <[haioutbreak@cdc.gov](mailto:haioutbreak@cdc.gov)>

**Subject:** URDO: Conf Call requested this afternoon at 1:30 PM.

**Importance:** High

Dear URDO WG members,

You might have heard about this outbreak that is taking place at a retirement community at Fairfax County, VA involving about 50 residents with 2 deaths.

<https://abcnews.com/US/respiratory-outbreak-investigated-retirement-community-54-residents-fall/story?id=64275865>

The VA Northern Regional epidemiologist reached out for assistance with specimen testing and a conference call at **1:30PM this afternoon**.

I apologize for the short notice, but could you please identify **1~2 people** from each group (D/DVD/DHQP) who could join this call this afternoon with VA, and I will send out a meeting invite.

The brief information I received are:

- This is an upscale retirement community with >400 residents in total.
- To date, more than 50 residents are ill, with at least 50 meeting their case definition of shortness of breath, cough, or pneumonia
- 19 were diagnosed with pneumonia (most were X-ray confirmed)
- 18 hospitalizations
- 2 deaths (unknown if deaths were due to the respiratory illness. At least one was a hospice patient)
- Details of laboratory tests are unknown, but hospitalized patients received workup including respiratory panel, blood culture, sputum culture, UAT for *Legionella*. Causative pathogen has not been identified
- No illness among staff
- The facility has ceased group activities in the facility
- Currently, 7 respiratory specimens are at DCLS (VA state lab). 5 have been tested for influenza and they are negative.

If you have specific questions that you would like to ask them, please send them to me by email by **11AM**. I will compile them to share with VA so that they have some time to prepare.

Thank you very much in advance!

Miwako

**From:** [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#)  
**To:** [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#); [Nanduri, Srinivas Acharya \(CDC/DDID/NCIRD/DBD\)](#)  
**Subject:** RE: Fairfax Retirement Community - For Evening News  
**Date:** Friday, July 12, 2019 2:41:30 PM

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No worries

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>  
**Sent:** Friday, July 12, 2019 1:42 PM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yxj2@cdc.gov](mailto:yxj2@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

Thanks for the offer, Miwako. I have been swamped today with other consult calls and I'm behind on everything... but if there's anything I can do to help please let me know!

Jessica C. Smith, MPH  
Epidemiologist | Centers for Disease Control and Prevention  
NCIRD/DBD/Respiratory Diseases Branch  
404.718.5205 | [lyd7@cdc.gov](mailto:lyd7@cdc.gov)

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Sent:** Friday, July 12, 2019 1:25 PM  
**To:** Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yxj2@cdc.gov](mailto:yxj2@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

Hi Jessica,

Sri and I are planning to take the call from Tamara's office. Feel free to join if you'd like (although I may not announce you two since I don't want them to be overwhelmed by this initial call).

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>  
**Sent:** Friday, July 12, 2019 1:20 PM  
**To:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[agp0@cdc.gov](mailto:agp0@cdc.gov)>, Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>, Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[mj4@cdc.gov](mailto:mj4@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yxj2@cdc.gov](mailto:yxj2@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

Hi Miwako and all,

I haven't been in touch with VA for this investigation, but the *Legionella* lab (Claressa specifically) has

had correspondence with Lauren Turner from the state lab about potentially submitting specimens but I'm not sure if that is for URDO or *Legionella* specific testing. I understand that several patients at this facility were tested for *Legionella* via urinary antigen and were negative. Let me know if there's anything I can do to help.

Thanks,  
Jess

Jessica C. Smith, MPH  
Epidemiologist | Centers for Disease Control and Prevention  
NCIRD/DBD/Respiratory Diseases Branch  
404 718 5205 | [jvd7@cdc.gov](mailto:jvd7@cdc.gov)

**From:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
**Sent:** Friday, July 12, 2019 10:00 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[jvd7@cdc.gov](mailto:jvd7@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[lu4@cdc.gov](mailto:lu4@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yxi2@cdc.gov](mailto:yxi2@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

Thanks for the update, Miwako. Let me know if you think anyone from comms should join on the call.

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Sent:** Friday, July 12, 2019 9:59 AM  
**To:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>; Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[jvd7@cdc.gov](mailto:jvd7@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[lu4@cdc.gov](mailto:lu4@cdc.gov)>; Nanduri, Srinivas Acharya (CDC/DDID/NCIRD/DBD) <[yxi2@cdc.gov](mailto:yxi2@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

FYI: I just spoke with the epidemiologist at VA Northern Region. They would like to have a conf call this afternoon.

Miwako

**From:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
**Sent:** Friday, July 12, 2019 7:59 AM  
**To:** Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>; Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[jvd7@cdc.gov](mailto:jvd7@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[lu4@cdc.gov](mailto:lu4@cdc.gov)>  
**Subject:** RE: Fairfax Retirement Community - For Evening News

haven't hear anything about this. Looping in the URDO and Legionella SMEs to see if they know anything Thanks!

**From:** Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>  
**Sent:** Thursday, July 11, 2019 4:59 PM  
**To:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[luu4@cdc.gov](mailto:luu4@cdc.gov)>  
**Subject:** FW: Fairfax Retirement Community - For Evening News

Hi Alison,

Also checking this with you in case it might be LD - there is a retirement community in Virginia that with an unknown respiratory disease outbreak. Below is a statement from the retirement community and the local HD.

Thanks,  
Kristen

**From:** Kelly, Bertram (CDC/OD/OADC) <[msy5@cdc.gov](mailto:msy5@cdc.gov)>  
**Sent:** Thursday, July 11, 2019 4:52 PM  
**To:** Nordlund, Kristen (CDC/DDID/NCIRD/OD) <[hok4@cdc.gov](mailto:hok4@cdc.gov)>  
**Cc:** Sharan, Martha (CDC/DDID/NCIRD/OD) <[luu4@cdc.gov](mailto:luu4@cdc.gov)>  
**Subject:** FW: Fairfax Retirement Community - For Evening News

Does NCIRD have anything on a respiratory illness in Virginia?

Please see below.

**From:** Strauss, Eric M. <(b)(6)>  
**Sent:** Thursday, July 11, 2019 4:47 PM  
**To:** Kelly, Bertram (CDC/OD/OADC) <[msy5@cdc.gov](mailto:msy5@cdc.gov)>  
**Subject:** Fairfax Retirement Community - For Evening News

Hiya Bert.

Working on a story for World News with David Muir.

Do you have any guidance on this viral outbreak in Virginia you can help us with please?

Two people have died, and 18 others are hospitalized after a "respiratory illness" outbreak at a Virginia retirement home.

Over the past 11 days, a total of 54 individuals became ill with “respiratory symptoms ranging from upper respiratory symptoms (cough) to pneumonia,” according to the Fairfax County Department of Health.

It’s unclear how the illness came about. Of those initially hospitalized, seven have since returned to the retirement home, Courtney Benoff, regional communications manager for Erikson Living, which owns the retirement home, said.

Fairfax County Health Department is investigating the incident.

**Statement from Greenspring Retirement Community:**

Greenspring’s highest priority is the welfare of those who live and work on campus. In keeping with this commitment the community has acted with an abundance of caution, and in partnership with the Fairfax County Department of Health, has taken all necessary measures to fully implement proven infection prevention and control strategies. We remain vigilant in our response and will continue to provide frequent and transparent updates to residents, staff and family members.

**Statement from Fairfax County Department of Health:**

Fairfax County Health Department is conducting an outbreak investigation at Greenspring, an assisted living facility in Springfield, Va. The Health Department was recently informed that over the last 11 days a total of 54 individuals out of the 263 residents in this facility have become ill with respiratory symptoms ranging from upper respiratory symptoms (cough) to pneumonia. Of the ill individuals, 18 have been hospitalized and two have died. A specific cause has not yet been identified but additional tests are being done by the Virginia Department of Health and Inova Health System. While illnesses continue to occur, there have been no new hospitalizations in the past couple of days.

Respiratory outbreaks at facilities for vulnerable, older adult populations are not uncommon, as we typically see 5-10 per year. This outbreak differs in that it is occurring in July whereas most outbreaks of this kind are in the winter/flu season. There has been excellent collaboration between Greenspring and the Health Department, and appropriate measures have been taken to reduce the risk of infection and keep residents safe, including closing the facility to new admissions, cancelling group activities, keeping ill residents in their rooms, and increasing cleaning.

---

**Eric M. Strauss, ABC News**

**Managing Editor, Medical Unit**

[www.ericmstrauss.com](http://www.ericmstrauss.com)

Phone: (b)(6)

@ericMstrauss



**From:** [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#)  
**To:** [Cooley, Laura A. \(CDC/DDID/NCIRD/DBD\)](#); [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#); [Lee, Sooji \(CDC/DDID/NCIRD/DBD\) \(CTR\)](#)  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51  
**Date:** Tuesday, July 16, 2019 10:39:23 AM

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Thank YOU all!

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:21 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Excellent! Thanks, Miwako!

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:17 AM  
**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Hi Laura,

The following is what I proposed as the call. Fairfax county has been telling me that they would share a line list/list of specimens, but that has not happened yet.  
We can ask to clarify at the beginning of the call.

Miwako

1. Roll call
2. Investigation updates (Fairfax CO, VDH)
  - Case count (confirmed/probable, any staff cases), # hospitalized, # ICU, # deaths
  - # of new cases since the last call (Friday, July 12<sup>th</sup>)
  - Updates on laboratory testing done at the hospital
  - Laboratory testing done at DCLS
  - Updates on any additional PH interventions (including any updates from Heatherwood)
3. Status of specimens sent to CDC and availability of results (CDC lab)
  - # and types of specimens received
  - Status of testing
4. Discussion on possible causes, next steps

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 10:07 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Subject:** Re: ProMED Digest, Vol 85, Issue 51

Perfect! Ignore the other email you are about to get from me. I'm having some major issues with Outlook--messages sit for 5-10 minutes before leaving my outbox. I am sending this via webmail to avoid confusion (i.e., you'll get this before the other email I just sent). I was curious about others from RDB on the call--I had misinterpreted your previous email to say that you wouldn't be able to join the call. Thanks for clarifying!

I did have another question about lab results. Will they go through the results to date at the start of the call? Would be helpful to know how many UATs have been performed (and if they were performed prior to the initiation of abx).

---

**From:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)  
**Sent:** Tuesday, July 16, 2019 10:02:37 AM  
**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); Smith, Jessica (CDC/DDID/NCIRD/DBD), Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)  
**Cc:** Albert, Alison P. (CDC/DDID/NCIRD/DBD)  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

And to your last point,

The other RDB epi would be me. But we will also have people from DVD, ID, and DHQP, so I thought we have plenty from CDC. We will also have Jonas, and Alison (thank you) might be listening in.

-----Original Message-----

**From:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
**Sent:** Tuesday, July 16, 2019 9:47 AM  
**To:** Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <[npf3@cdc.gov](mailto:npf3@cdc.gov)>  
**Cc:** Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
**Subject:** RE: ProMED Digest, Vol 85, Issue 51

Hi Miwako! Looping in Sooji, who is available to join the call at 3:00. Thanks, Sooji!

Sooji, see below and attached.

Interesting discrepancy with the pneumonia count. This would be important to clarify. As they mention, PF, by definition, is not pneumonia--and it would be extremely unusual for PF to result in hospitalization or death. PF is self-resolving--so if these folks are requiring abx to recover, I would consider other diagnoses.

They are right that PF is a bit of a diagnostic challenge. The old gold standard is serology, but you have to get acute and convalescent sera (and nobody does that anymore). UAT is occasionally positive in PF, but it's not super reliable (for PF, UAT is really only helpful when positive).

Just to clarify, it doesn't look like Legionella is included on the state's respiratory panel. That would be the one diagnostic gap if LD is still being considered (i.e., sounds like UATs to date have been negative, but a non-Lp1 Legionella can always be including in the differential). Just chatted with Jess and she said that Claressa communicated with the VA lab last week--and recommended adding Legionella PCR. Apparently, she offered for them to send it here, but also said that if they could find a lab to do it locally, that might be more efficient. Miwako, do you know if there have been any developments here? Y'all can always loop in Claressa if you have questions.

Miwako, will there be anyone else from RDB on this call?

Thanks so much!  
Laura

-----Original Message-----

From: Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <[ydk3@cdc.gov](mailto:ydk3@cdc.gov)>  
Sent: Tuesday, July 16, 2019 9:10 AM  
To: Smith, Jessica (CDC/DDID/NCIRD/DBD) <[lyd7@cdc.gov](mailto:lyd7@cdc.gov)>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <[whz3@cdc.gov](mailto:whz3@cdc.gov)>  
Cc: Albert, Alison P. (CDC/DDID/NCIRD/DBD) <[aqp0@cdc.gov](mailto:aqp0@cdc.gov)>  
Subject: FW: ProMED Digest, Vol 85, Issue 51

Good morning Jessica, Laura.

As you may be aware, on Friday, we had an URDO call related to the outbreak happening at a retirement community in Fairfax VA.

I just read the promed posting related to this and realized that someone is entertaining the idea that Pontiac fever might be possible.

Note that the information described below is different from what we heard on Friday (i.e., promed article below says that only 2/55 had pneumonia, whereas on Friday, we were told 19/55 had provider-diagnosed pneumonia (most were X-ray confirmed)).

At this point, I have low suspicion based on the information we received. But given this posting, I am wondering if someone from the Legionella team could join the call we have scheduled at 3pm? I'd be happy to forward the invite if you could tell me who might be available to join. Unfortunately I am teleworking today (my husband having a procedure), so I don't have a room scheduled.

I will also forward the call notes from Friday.

Thanks again, and please feel free to call me with Qs ((b)(6)).

Miwako

-----Original Message-----

From: [promed-bounces@promedmail.org](mailto:promed-bounces@promedmail.org) <[promed-bounces@promedmail.org](mailto:promed-bounces@promedmail.org)> On Behalf Of [promed-request@promedmail.org](mailto:promed-request@promedmail.org)  
Sent: Tuesday, July 16, 2019 8:00 AM  
To: [promed@promedmail.org](mailto:promed@promedmail.org)  
Subject: ProMED Digest, Vol 85, Issue 51

Today's Topics:

2. PRO/EDR> Undiagnosed respiratory illness - USA (02): (VA)  
fatal, retirement community ([promed@promedmail.org](mailto:promed@promedmail.org))

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Message: 2

Date: Tue, 16 Jul 2019 07:15:12 +0000

From: [promed@promedmail.org](mailto:promed@promedmail.org)

Subject: PRO/EDR> Undiagnosed respiratory illness - USA (02): (VA)  
fatal, retirement community

To: [promed-post@promedmail.org](mailto:promed-post@promedmail.org), [promed-cdr-post@promedmail.org](mailto:promed-cdr-post@promedmail.org)

Message-ID:

<0100016bf9a29eb1-b1d9d368-21b0-44f7-93b1-8662d8a8d997-  
000000@email.amazonses.com>

Content-Type: text/plain; charset=UTF-8

## UNDIAGNOSED RESPIRATORY ILLNESS - USA (02): (VIRGINIA) FATAL, RETIREMENT COMMUNITY

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A ProMED-mail post

<<http://www.promedmail.org>>

ProMED-mail is a program of the

International Society for Infectious Diseases <<http://www.isid.org>>

Date: Sun 14 Jul 2019

Source: Fairfax News [edited]

<<http://fairfaxnews.com/2019/07/health-officials-hoping-to-find-cause-of-greenspring-outbreak/>>

Testing will continue this week to try to learn why 55 residents of the Greenspring assisted-living center in Springfield have become ill,

20 have been hospitalized, and 2 have died in recent weeks. County health officials say the center has been closed to new admissions while efforts to pinpoint the cause of the infections continue.

"The individuals who died were hospitalized with pneumonia. Both were older adults and had complex medical problems. The Health Department does not know the full medical history and the extent to which the pneumonia contributed to the deaths," said spokesman John Silcox in a news release [Fri 12 Jul 2019]. Health Department officials said that tests [have] so far been negative for common viral and bacterial infections, including [influenza] and legionnaires' disease [LD]. Samples have been sent to the Virginia Health Department in Richmond and forwarded to the federal Centers for Disease Control and Prevention in Atlanta for additional testing.

Greenspring is located on a 58-acre [about 23 ha] campus. It features a comprehensive continuing care neighborhood that includes assisted living, memory care, short-term rehabilitation, and long-term care.

Greenspring is operated by Erickson Living, which has facilities housing 24 000 people in 11 states.



County health officials have said Erickson is doing an "excellent job" of managing the outbreak.

[byline: Truman Lewis]

--

communicated by:

ProMED-mail

<[promed@promedmail.org](mailto:promed@promedmail.org)>

[The news article above updates information on an outbreak of an acute respiratory illness that has now affected 55 individuals, 20 of whom were hospitalized, 2 with a pneumonia that was fatal, in the past 2 weeks in the assisted-living and skilled-nursing sections of a retirement community in northern Virginia. Symptoms included fever, cough, body aches, wheezing, hoarseness, and general weakness. The specific cause of the outbreak has not yet been identified, although the article reports "tests [have] so far been negative for common viral and bacterial infections, including [influenza] and legionnaires' disease [LD]." The viral and bacterial infections that were ruled out are not specified.

We have only been told that 2 of the 55 affected individuals had pneumonia. Pontiac fever, the non-pneumonic form of legionella infection, would still be a possible cause for those cases without pneumonia. Sputum culture and the urinary antigen test for LD are usually negative in Pontiac fever. Symptoms of Pontiac fever (fever, malaise, and muscle aches) are less severe than LD, and resolve in 2 to 5 days without antibiotic treatment (<<https://www.cdc.gov/legionella/clinicians/clinical-features.html>>).

Pontiac fever develops within hours to 3 days after exposure vs 2 to 10 days for LD. Attack rates for Pontiac fever are high; up to 95% of exposed persons become ill vs less than 5% for LD. Unlike LD, there appear to be no predisposing host conditions for Pontiac fever (<<https://www.cdc.gov/legionella/clinicians/disease-specifics.html>>).

A more detailed description of the clinical presentation and prior health status of the affected individuals and whether they were staff or residents would be helpful.

\_Chlamydia (Chlamydophila) pneumoniae\_ and \_Mycoplasma pneumoniae\_ infections occur year-round, but are characterized by their slow spread through closed populations, unlike the outbreak described in the news article above.

Greenspring is a retirement community, with independent living, assisted living, memory care, short- and long-term nursing care units, supported by a staff of more than 1200 in Springfield, Fairfax County in northern Virginia (<<https://www.ericksonliving.com/greenspring/about>>). Springfield, along with collective areas with Springfield addresses, having an estimated population of more than 100 000 residents in 2010, is located in the Washington Metropolitan Area (<[https://en.wikipedia.org/wiki/Springfield,\\_Virginia](https://en.wikipedia.org/wiki/Springfield,_Virginia)>). A map showing the location of Springfield can be found at <<https://goo.gl/maps/chDaXq4jVgnfDMSNA>>  
HealthMap/ProMED-mail map of Virginia, United States:  
<<http://healthmap.org/promed/p/49594>>

We await further developments in the investigation of this outbreak. - Mod.ML]

[See Also:

Undiagnosed respiratory illness - USA: (VA) fatal, retirement community

<http://promedmail.org/post/20190713.6565337>

2018

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Undiagnosed respiratory illness - USA (02): (NY) ex Middle East, influenza conf.  
<http://promedmail.org/post/20180906.6011730>  
Undiagnosed respiratory illness - USA: (New York) ex Middle East, flight, RFI  
<http://promedmail.org/post/20180905.6009759>  
.....sb/ml/mj/sh

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End of ProMED Digest, Vol 85, Issue 51

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**From:** [Swartwood, Candice \(CDC/DDID/NCIRD/OD\)](#)  
**To:** [Fox, Kimberley \(CDC/DDID/NCIRD/DBD\)](#); [Houston, Marsha \(CDC/DDID/NCIRD/DBD\)](#)  
**Cc:** [Biagioni, Mark T. \(CDC/DDID/NCIRD/DBD\)](#); [Craig, Allen \(CDC/DDID/NCIRD/DBD\)](#); [Cooley, Laura A. \(CDC/DDID/NCIRD/DBD\)](#); [Smith, Jessica \(CDC/DDID/NCIRD/DBD\)](#); [Kobayashi, Miwako \(CDC/DDID/NCIRD/DBD\)](#); [Posner, Sam \(CDC/DDID/NCIRD/OD\)](#)  
**Subject:** Re: Request for Congressional office briefing for office of Gerald Connolly--Virginia on Monday July 22  
**Date:** Monday, July 22, 2019 11:01:04 AM  
**Attachments:** [image001.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)

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Just to update - the congressional staffer has not responded as of yet to the briefing times. For now, we do not think the briefing will happen today but will let you know if that changes.

---

**From:** Swartwood, Candice (CDC/DDID/NCIRD/OD) <chj8@cdc.gov>  
**Sent:** Friday, July 19, 2019 1:03:46 PM  
**To:** Fox, Kimberley (CDC/DDID/NCIRD/DBD) <kaf6@cdc.gov>; Houston, Marsha (CDC/DDID/NCIRD/DBD) <akq2@cdc.gov>  
**Cc:** Biagioni, Mark T. (CDC/DDID/NCIRD/DBD) <gld5@cdc.gov>; Craig, Allen (CDC/DDID/NCIRD/DBD) <afc0@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <ydk3@cdc.gov>; Posner, Sam (CDC/DDID/NCIRD/OD) <shp5@cdc.gov>  
**Subject:** Re: Request for Congressional office briefing for office of Gerald Connolly--Virginia on Monday July 22

Sounds good. I will share these times and let you know when it is scheduled. We can find a room for folks to gather as well.

---

**From:** Fox, Kimberley (CDC/DDID/NCIRD/DBD)  
**Sent:** Friday, July 19, 2019 12:59:01 PM  
**To:** Houston, Marsha (CDC/DDID/NCIRD/DBD); Swartwood, Candice (CDC/DDID/NCIRD/OD)  
**Cc:** Biagioni, Mark T. (CDC/DDID/NCIRD/DBD); Craig, Allen (CDC/DDID/NCIRD/DBD); Cooley, Laura A. (CDC/DDID/NCIRD/DBD); Smith, Jessica (CDC/DDID/NCIRD/DBD); Kobayashi, Miwako (CDC/DDID/NCIRD/DBD)  
**Subject:** RE: Request for Congressional office briefing for office of Gerald Connolly--Virginia on Monday July 22

Hi Marsha, all the times proposed by Candice for Monday are fine with me. I would like to have Allen and Miwako in the room if okay with Sam when we do this call.

Thanks,  
Kim

---

**From:** Houston, Marsha (CDC/DDID/NCIRD/DBD) <akq2@cdc.gov>  
**Sent:** Friday, July 19, 2019 12:52 PM  
**To:** Swartwood, Candice (CDC/DDID/NCIRD/OD) <chj8@cdc.gov>  
**Cc:** Fox, Kimberley (CDC/DDID/NCIRD/DBD) <kaf6@cdc.gov>; Biagioni, Mark T. (CDC/DDID/NCIRD/DBD) <gld5@cdc.gov>; Craig, Allen (CDC/DDID/NCIRD/DBD) <afc0@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Kobayashi, Miwako (CDC/DDID/NCIRD/DBD) <ydk3@cdc.gov>

**Subject:** Request for Congressional office briefing for office of Gerald Connolly--Virginia on Monday July 22

Thanks Candice.

Kim. Can you please confirm your participation availability as soon as possible? DBD will need to coordinate other participants/SME attendance for this briefing this afternoon. Thanks—Marsha

---

**From:** Swartwood, Candice (CDC/DDID/NCIRD/OD) <[chj8@cdc.gov](mailto:chj8@cdc.gov)>

**Sent:** Friday, July 19, 2019 12:32 PM

**To:** Houston, Marsha (CDC/DDID/NCIRD/DBD) <[akq2@cdc.gov](mailto:akq2@cdc.gov)>

**Cc:** Biagioni, Mark T. (CDC/DDID/NCIRD/DBD) <[gld5@cdc.gov](mailto:gld5@cdc.gov)>; Barry, Brooke (CDC/DDID/NCIRD/OD) <[bmb8@cdc.gov](mailto:bmb8@cdc.gov)>

**Subject:** Fw: Rep. Connolly Letter

Hi Marsha,

We received this letter and suggestion for a briefing on the situation in VA. I checked with NCIRD leadership and Sam Posner is going to lead the briefing and he would like Kim Fox to be there as well. Sam is going to give Kim a heads up given we are looking for times on Monday. I took a quick look at calendars and it looks like 10:30-11am, 12-12:30pm and 3-4pm may work.

You may want to send this to Kim and if you could double check her availability, that would be great. Thanks, Candice

---

**From:** Tourk, Nancy R. (CDC/OD/CDCWO)

**Sent:** Thursday, July 18, 2019 5:37 PM

**To:** Barry, Brooke (CDC/DDID/NCIRD/OD); Swartwood, Candice (CDC/DDID/NCIRD/OD)

**Cc:** Pearson, Kate L. (CDC/DDID/NCIRD/OD); Beauvais, Denise (CDC/DDID/NCIRD/OD); Brand, Anstice M. (CDC/OD/CDCWO); Wortman, Eric (CDC/OD/CDCWO)

**Subject:** FW: Rep. Connolly Letter

Hi Brooke and Candice

Attached is a letter we just received from Rep. Connolly's office re: respiratory disease outbreak in Fairfax Co., VA. I spoke to Anstice and she thinks it would be a good idea to offer Collin a briefing to update him on what we are doing. Is this something we can do pretty quickly, maybe tomorrow or Monday? Please let me know your thoughts. Happy to talk to you first thing tomorrow if it is helpful.

Nancy Tourk



CDC Washington Office  
Phone: 202-245-0568   
[NTourk@cdc.gov](mailto:NTourk@cdc.gov)

---

**From:** Davenport, Collin <[Collin.Davenport@mail.house.gov](mailto:Collin.Davenport@mail.house.gov)>  
**Sent:** Thursday, July 18, 2019 5:04 PM  
**To:** Tourk, Nancy R. (CDC/OD/CDCWO) <[wxk8@cdc.gov](mailto:wxk8@cdc.gov)>  
**Subject:** Rep. Connolly Letter

Nancy,

Please find attached a letter from Rep. Connolly regarding a recent outbreak of a respiratory illness in our community. Thank you for your attention to this request, and please let me know if you have any questions.

Regards,

Collin Davenport | Legislative Director | Rep. Gerald E. Connolly | RHOB 2238 | (202) 225-1492 